

PHA Plans

5 Year Plan for Fiscal Years 2000 - 2004
Annual Plan for Fiscal Year 2001

**NOTE: THIS PHA PLANS TEMPLATE (HUD 50075) IS TO BE COMPLETED IN
ACCORDANCE WITH INSTRUCTIONS LOCATED IN APPLICABLE PIH
NOTICES**

**PHA Plan
Agency Identification**

PHA Name: Housing Authority of the City of Fort Pierce

PHA Number: FL041

PHA Fiscal Year Beginning: 07/2001

Public Access to Information

Information regarding any activities outlined in this plan can be obtained by contacting:

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices

Display Locations For PHA Plans and Supporting Documents

The PHA Plans (including attachments) are available for public inspection at:

- ☒ Main administrative office of the PHA
- ☐ PHA development management offices
- ☐ PHA local offices
- ☐ Main administrative office of the local government
- ☐ Main administrative office of the County government
- ☐ Main administrative office of the State government
- ☒ Public library
- ☐ PHA website
- ☐ Other (list below)

PHA Plan Supporting Documents are available for inspection at: (select all that apply)

- ☒ Main business office of the PHA
- ☐ PHA development management offices
- ☐ Other (list below)

5-YEAR PLAN
PHA FISCAL YEARS 2000 - 2004
[24 CFR Part 903.5]

A. Mission

State the PHA's mission for serving the needs of low-income, very low income, and extremely low-income families in the PHA's jurisdiction. (select one of the choices below)

☐ The mission of the PHA is the same as that of the Department of Housing and Urban Development: To promote adequate and affordable housing, economic opportunity and a suitable living environment free from discrimination.

☒ The PHA's mission is: (state mission here)
To provide quality housing to eligible people in a professional, fiscally prudent manner and be a positive force in our community by working with others to assist these families with appropriate supportive services.

B. Goals

The goals and objectives listed below are derived from HUD's strategic Goals and Objectives and those emphasized in recent legislation. PHAs may select any of these goals and objectives as their own, or identify other goals and/or objectives. Whether selecting the HUD-suggested objectives or their own, **PHAS ARE STRONGLY ENCOURAGED TO IDENTIFY QUANTIFIABLE MEASURES OF SUCCESS IN REACHING THEIR OBJECTIVES OVER THE COURSE OF THE 5 YEARS.** (Quantifiable measures would include targets such as: numbers of families served or PHAS scores achieved.) PHAs should identify these measures in the spaces to the right of or below the stated objectives.

HUD Strategic Goal: Increase the availability of decent, safe, and affordable housing.

☐ PHA Goal: Expand the supply of assisted housing

Objectives:

- ☒ Apply for additional rental vouchers:
- ☒ Reduce public housing vacancies:
- ☒ Leverage private or other public funds to create additional housing opportunities:
- ☐ Acquire or build units or developments
- ☒ Other (list below)

PHA Goal: Improve the quality of assisted housing

Objectives:

- ☒ Improve public housing management: (PHAS score)
- ☒ Improve voucher management: (SEMAP score)
- ☒ Increase customer satisfaction:
- ☒ Concentrate on efforts to improve specific management functions:
e.g., public housing and Section 8 programs and peripherals
- ☒ Renovate or modernize public housing units:
- ☒ Demolish or dispose of obsolete public housing:
- ☒ Provide replacement public housing:
- ☒ Provide replacement vouchers:
- ☒ Other: (list below)

- X PHA Goal: Increase assisted housing choices
- Objectives:
- X Provide voucher mobility counseling:
- X Conduct outreach efforts to potential voucher landlords
- Increase voucher payment standards
- X Implement voucher home ownership program:
- X Implement public housing or other home ownership programs:
- Implement public housing site-based waiting lists:
- Convert public housing to vouchers:
- Other: (list below)

HUD Strategic Goal: Improve community quality of life and economic vitality

- X PHA Goal: Provide an improved living environment
- Objectives:
- X Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments:
- X Implement measures to promote income mixing in public housing by assuring access for lower income families into higher income developments; however, this is not a problem at our authority right now
- X Implement public housing security improvements: this is being done through the drug elimination and capital improvement programs
- X Designate developments or buildings for particular resident groups (elderly, persons with disabilities)
- X Other: (list below)
- Study and determine feasibility of converting one elderly development into an Assisted Living Facility for low income people. This has been a Housing goal for some time.

HUD Strategic Goal: Promote self-sufficiency and asset development of families and individuals

- X PHA Goal: Promote self-sufficiency and asset development of assisted households
- Objectives:
- X Increase the number and percentage of employed persons in assisted families:
- X Provide or attract supportive services to improve assistance recipients' employability:
- X Provide or attract supportive services to increase independence for the elderly or families with disabilities.
- Other: (list below)

HUD Strategic Goal: Ensure Equal Opportunity in Housing for all Americans

- X PHA Goal: Ensure equal opportunity and affirmatively further fair housing
Objectives:
X Undertake affirmative measures to ensure access to assisted housing
regardless of race, color, religion national origin, sex, familial status, and
disability:
X Undertake affirmative measures to provide a suitable living environment
for families living in assisted housing, regardless of race, color, religion
national origin, sex, familial status, and disability:
X Undertake affirmative measures to ensure accessible housing to
persons with all varieties of disabilities regardless of unit size required:
_____ Other: (list below)

Other PHA Goals and Objectives: (list below)

Annual PHA Plan
PHA Fiscal Year 2000
[24 CFR Part 903.7]

Annual Plan Type:

Select which type of Annual Plan the PHA will submit.

☒ **Standard Plan**

Streamlined Plan:

- ☐ **High Performing PHA**
☐ **Small Agency (<250 Public Housing Units)**
☐ **Administering Section 8 Only**

☐ **Troubled Agency Plan**

Executive Summary of the Annual PHA Plan

[24 CFR Part 903.7 9 (r)]

Provide a brief overview of the information in the Annual Plan, including highlights of major initiatives and discretionary policies the PHA has included in the Annual Plan.

Annual Plan Table of Contents

[24 CFR Part 903.7 9 (r)]

Provide a table of contents for the Annual Plan, including attachments, and a list of supporting documents available for public inspection.

Table of Contents

Page #

Annual Plan

Executive Summary

i. Table of Contents

Housing Needs

1. Financial Resources
2. Policies on Eligibility, Selection and Admissions
3. Rent Determination Policies
4. Operations and Management Policies
5. Grievance Procedures
6. Capital Improvement Needs
7. Demolition and Disposition
8. Designation of Housing
9. Conversions of Public Housing
10. Homeownership
11. Community Service Programs
12. Crime and Safety
13. Pets (Inactive for January 1 PHAs)
14. Civil Rights Certifications (included with PHA Plan Certifications)
15. Audit
16. Asset Management
17. Other Information

Attachments

Indicate which attachments are provided by selecting all that apply. Provide the attachment's name (A, B, etc.) in the space to the left of the name of the attachment. Note: If the attachment is provided as a **SEPARATE** file submission from the PHA Plans file, provide the file name in parentheses in the space to the right of the title.

Required Attachments:

- ☒ Admissions Policy for Deconcentration
☒ FY 2000 Capital Fund Program Annual Statement
 _____ Most recent board-approved operating budget (Required Attachment for PHAs that are troubled or at risk of being designated troubled ONLY)

Optional Attachments:

- _____ PHA Management Organizational Chart
 _____ FY 2000 Capital Fund Program 5 Year Action Plan
 _____ Public Housing Drug Elimination Program (PHDEP) Plan
 _____ Comments of Resident Advisory Board or Boards (must be attached if not included in PHA Plan text)
 _____ Other (List below, providing each attachment name)

Supporting Documents Available for Review

Indicate which documents are available for public review by placing a mark in the ?Applicable & On Display? column in the appropriate rows. All listed documents must be on display if applicable to the program activities conducted by the PHA.

List of Supporting Documents Available for Review

Applicable & On Display	Supporting Document	Applicable Plan Component
X	PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations	5 Year and Annual Plans
X	State/Local Government Certification of Consistency with the Consolidated Plan	5 Year and Annual Plans
	Fair Housing Documentation: Records reflecting that the PHA has examined its programs or proposed programs, identified any impediments to fair housing choice in those programs, addressed or is addressing those impediments in a reasonable fashion in view of the resources available, and worked or is working with local jurisdictions to implement any of the jurisdictions' initiatives to affirmatively further fair housing that require the PHA's involvement.	5 Year and Annual Plans
X	Consolidated Plan for the jurisdiction/s in which the PHA is located (which includes the Analysis of Impediments to Fair Housing Choice (AI)) and any additional backup data to support statement of housing needs in the jurisdiction	Annual Plan: Housing Needs
X	Most recent board-approved operating budget for the public housing program	Annual Plan: Financial Resources;
X	Public Housing Admissions and (Continued) Occupancy Policy (A&O), which includes the Tenant Selection and Assignment Plan [TSAP]	Annual Plan: Eligibility, Selection, and Admissions Policies

Applicable & On Display	Supporting Document	Applicable Plan Component
X	Section 8 Administrative Plan	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public Housing Deconcentration and Income Mixing Documentation: 1. PHA board certifications of compliance with deconcentration requirements (section 16(a) of the US Housing Act of 1937, as implemented in the 2/18/99 <i>Quality Housing and Work Responsibility Act Initial Guidance; Notice</i> and any further HUD guidance) and 2. Documentation of the required deconcentration and income mixing analysis	Annual Plan: Eligibility, Selection, and Admissions Policies
X	Public housing rent determination policies, including the methodology for setting public housing flat rents <u>xxx</u> check here if included in the public housing A & O Policy	Annual Plan: Rent Determination
X	Schedule of flat rents offered at each public housing development check here if included in the public housing <u>XXX</u> A & O Policy	Annual Plan: Rent Determination
X	Section 8 rent determination (payment standard) policies <u>XXX</u> check here if included in Section 8 Administrative Plan	Annual Plan: Rent Determination
X	Public housing management and maintenance policy documents, including policies for the prevention or eradication of pest infestation (including cockroach infestation)	Annual Plan: Operations and Maintenance
X	Public housing grievance procedures <u>XXX</u> check here if included in the public housing A & O Policy	Annual Plan: Grievance Procedures
X	Section 8 informal review and hearing procedures <u>XXX</u> check here if included in Section 8 Administrative Plan	Annual Plan: Grievance Procedures
X	The HUD-approved Capital Fund/Comprehensive Grant Program Annual Statement (HUD 52837) for the active grant year	Annual Plan: Capital Needs
	Most recent CIAP Budget/Progress Report (HUD 52825) for any active CIAP grant	Annual Plan: Capital Needs
X	Most recent, approved 5 Year Action Plan for the Capital Fund/Comprehensive Grant Program, if not included as an attachment (provided at PHA option)	Annual Plan: Capital Needs
	Approved HOPE VI applications or, if more recent, approved or submitted HOPE VI Revitalization Plans or any other approved proposal for development of public housing	Annual Plan: Capital Needs
	Approved or submitted applications for demolition and/or disposition of public housing	Annual Plan: Demolition and Disposition
	Approved or submitted applications for designation of public housing (Designated Housing Plans)	Annual Plan: Designation of Public Housing
	Approved or submitted assessments of reasonable revitalization of public housing and approved or submitted conversion plans prepared pursuant to section 202 of the 1996 HUD Appropriations Act	Annual Plan: Conversion of Public Housing

Applicable & On Display	Supporting Document	Applicable Plan Component
	Approved or submitted public housing homeownership programs/plans	Annual Plan: Homeownership
	Policies governing any Section 8 Homeownership program check here if included in the Section 8 Administrative Plan	Annual Plan: Homeownership
	Any cooperative agreement between the PHA and the TANF agency	Annual Plan: Community Service & Self-Sufficiency
X	FSS Action Plan/s for public housing and/or Section 8	Annual Plan: Community Service & Self-Sufficiency
	Most recent self-sufficiency (ED/SS, TOP or ROSS or other resident services grant) grant program reports	Annual Plan: Community Service & Self-Sufficiency
X	The most recent Public Housing Drug Elimination Program (PHDEP) semi-annual performance report for any open grant and most recently submitted PHDEP application (PHDEP Plan)	Annual Plan: Safety and Crime Prevention
X	The most recent fiscal year audit of the PHA conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U. S.C. 1437c(h)), the results of that audit and the PHA's response to any findings	Annual Plan: Annual Audit
	Troubled PHAs: MOA/Recovery Plan	Troubled PHAs
	Other supporting documents (optional) (list individually; use as many lines as necessary)	(specify as needed)

1. Statement of Housing Needs

[24 CFR Part 903.7 9 (a)]

A. Housing Needs of Families in the Jurisdiction/s Served by the PHA

Based upon the information contained in the Consolidated Plan/s applicable to the jurisdiction, and/or other data available to the PHA, provide a statement of the housing needs in the jurisdiction by completing the following table. In the "Overall" Needs column, provide the estimated number of renter families that have housing needs. For the remaining characteristics, rate the impact of that factor on the housing needs for each family type, from 1 to 5, with 1 being "no impact" and 5 being "severe impact." Use N/A to indicate that no information is available upon which the PHA can make this assessment.

Housing Needs of Families in the Jurisdiction by Family Type							
Family Type	Overall	Afford- ability	Supply	Quality	Access- ibility	2. Size	Loca- tion
Income <= 30% of AMI	559	3	4	3	3	3	3
Income >30% but <=50% of AMI	871	3	4	3	3	3	3
Income >50% but <80% of AMI	1852	3	4	3	3	3	3
Elderly		3	4	3	3	3	3
Families with Disabilities		3	4	3	3	3	3
Race/Ethnicity		3	4	3	3	3	3
Race/Ethnicity		3	4	3	3	3	3
Race/Ethnicity		3	4	3	3	3	3
Race/Ethnicity							

What sources of information did the PHA use to conduct this analysis? (Check all that apply; all materials must be made available for public inspection.)

- ☒ Consolidated Plan of the Jurisdiction/s
Indicate year: 1999
- ☐ U.S. Census data: the Comprehensive Housing Affordability Strategy
(?CHAS?) dataset
- ☐ American Housing Survey data
Indicate year: _____
- ☒ Other housing market study
Indicate year: 1999
- ☐ Other sources: (list and indicate year of information)

***PHA local survey of jurisdiction/State of Florida Consolidated Plan and
City of Fort Pierce Consolidated Plan and previous 5 year information
obtained by consultant***

A. Housing Needs of Families on the Public Housing and Section 8 Tenant- Based Assistance Waiting Lists

State the housing needs of the families on the PHA's waiting list/s. **Complete one table for each type of PHA-wide waiting list administered by the PHA.** PHAs may provide separate tables for site-based or sub-jurisdictional public housing waiting lists at their option.

Housing Needs of Families on the Waiting List			
Waiting list type: (select one)			
<input checked="" type="checkbox"/>	Section 8 tenant based		
<input checked="" type="checkbox"/>	Public Housing		
<input checked="" type="checkbox"/>	Combined Section 8 and Public Housing		
<input checked="" type="checkbox"/>	Public Housing Site Based or sub-jurisdictional waiting list (optional)		
<input checked="" type="checkbox"/>	If used, identify which development is sub-jurisdictional.		
	# of families	% of total families	Annual Turnover
Waiting list total	944		120
Extremely low income <=30% AMI	837	89%	
Very low income (>30% but <=50% AMI)	97	10%	
Low income (>50% but <80% AMI)	10	01%	
Families with children	611	65%	
Elderly families	49	06%	
Families with Disabilities	119	13%	
Race/ethnicity B	676	72%	
Race/ethnicity H	20	03%	
Race/ethnicity W	47	05%	
Race/ethnicity O	36	04%	
Characteristics by Bedroom Size (Public Housing Only)			
1BR	170	34%	
2 BR	198	40%	
3 BR	103	20%	
4 BR	29	05%	
5 BR	2	01%	
5+ BR	0	0	

Is the waiting list closed (select one)? **X Public Housing - No** Yes for section 8
 If yes: **B.** How long has it been closed (# of months)? 2 years for section 8
 Does the PHA expect to reopen the list in the PHA Plan year? Yes for
 Does the PHA ^{section 8} permit specific categories of families onto the waiting list, even
 if generally closed? Yes for Public Housing

C. Strategy for Addressing Needs

Provide a brief description of the PHA's strategy for addressing the housing needs of families in the jurisdiction and on the waiting list **IN THE UPCOMING YEAR**, and the Agency's reasons for choosing this strategy.

(1) Strategies

Need: Shortage of affordable housing for all eligible populations

Strategy 1. Maximize the number of affordable units available to the PHA within its current resources by:

Select all that apply

- ☒ Employ effective maintenance and management policies to minimize the number of public housing units off-line
- ☒ Reduce turnover time for vacated public housing units
- ☒ Reduce time to renovate public housing units
- ☒ Seek replacement of public housing units lost to the inventory through mixed finance development
- ☐ Seek replacement of public housing units lost to the inventory through section 8 replacement housing resources
- ☒ Maintain or increase section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction
- ☒ Undertake measures to ensure access to affordable housing among families assisted by the PHA, regardless of unit size required
- ☐ Maintain or increase section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration
- ☒ Maintain or increase section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program
- ☒ Participate in the Consolidated Plan development process to ensure coordination with broader community strategies
- ☐ Other (list below)

Strategy 2: Increase the number of affordable housing units by:

Select all that apply

- ☐ Apply for additional section 8 units should they become available
- ☐ Leverage affordable housing resources in the community through the creation of mixed - finance housing
- ☐ Pursue housing resources other than public housing or Section 8 tenant-based assistance.
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 30% of median

Strategy 1: Target available assistance to families at or below 30 % of AMI

Select all that apply

- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in public housing
- ☐ Exceed HUD federal targeting requirements for families at or below 30% of AMI in tenant-based section 8 assistance
- ☐ Employ admissions preferences aimed at families with economic hardships
- ☐ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

Need: Specific Family Types: Families at or below 50% of median

Strategy 1: Target available assistance to families at or below 50% of AMI

Select all that apply

- ☐ Employ admissions preferences aimed at families who are working
- ☐ Adopt rent policies to support and encourage work
- ☐ Other: (list below)

B. Need: Specific Family Types: The Elderly

Strategy 1: Target available assistance to the elderly:

Select all that apply

- ☐ Seek designation of public housing for the elderly
- ☐ Apply for special-purpose vouchers targeted to the elderly, should they become available
- ☒ Other: (list below)
Apply for ALF medicaid vouchers and convert elderly building into Assisted Living Facility.

Need: Specific Family Types: Families with Disabilities

Strategy 1: Target available assistance to Families with Disabilities:

Select all that apply

- ☐ Seek designation of public housing for families with disabilities
- ☒ Carry out the modifications needed in public housing based on the section 504 Needs Assessment for Public Housing
- ☐ Apply for special-purpose vouchers targeted to families with disabilities, should they become available
- ☐ Affirmatively market to local non-profit agencies that assist families with disabilities
- ☐ Other: (list below)

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Strategy 1: Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

Select if applicable

☒ Affirmatively market to races/ethnicities shown to have disproportionate housing needs
Other: (list below)

Strategy 2: Conduct activities to affirmatively further fair housing

Select all that apply

☒ Counsel section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units
☒ Market the section 8 program to owners outside of areas of poverty /minority concentrations
Other: (list below)
Hold prospective landlord workshops

Other Housing Needs & Strategies: (list needs and strategies below)

(2) Reasons for Selecting Strategies

Of the factors listed below, select all that influenced the PHA's selection of the strategies it will pursue:

☒ Funding constraints
☒ Staffing constraints
☒ Limited availability of sites for assisted housing
Extent to which particular housing needs are met by other organizations in the community
☒ Evidence of housing needs as demonstrated in the Consolidated Plan and other information available to the PHA
☒ Influence of the housing market on PHA programs
☒ Community priorities regarding housing assistance
☒ Results of consultation with local or state government
☒ Results of consultation with residents and the Resident Advisory Board
☒ Results of consultation with advocacy groups
Other: (list below)

Statement of Financial Resources

[24 CFR Part 903.7 9 (b)]

List the financial resources that are anticipated to be available to the PHA for the support of Federal public housing and tenant-based Section 8 assistance programs administered by the PHA during the Plan year. Note: the table assumes that Federal public housing or tenant based Section 8 assistance grant funds are expended on eligible purposes; therefore, uses of these funds need not be stated. For other funds, indicate the use for those funds as one of the following categories: public housing operations, public housing capital improvements, public housing safety/security, public housing supportive services, Section 8 tenant-based assistance, Section 8 supportive services or other.

Financial Resources: Planned Sources and Uses		
Sources	Planned \$	Planned Uses
1. Federal Grants (FY 2000 grants)		

Sources	Planned \$	Planned Uses
a) Public Housing Operating Fund	\$1,661,706.00	
b) Public Housing Capital Fund	1,678,164.00	
c) HOPE VI Revitalization		
d) HOPE VI Demolition		
e) Annual Contributions for Section 8 Tenant-Based Assistance	3,880,399	
f) Public Housing Drug Elimination Program (including any Technical Assistance funds)	190,026	
g) Resident Opportunity and Self-Sufficiency Grants	45,000	
h) Community Development Block Grant		
i) HOME		
Other Federal Grants (list below)		
2. Prior Year Federal Grants (unobligated funds only) (list below)		
3. Public Housing Dwelling Rental Income	1,359,697.00	
4. Other income (list below)		
4. Non-federal sources (list below)		
Total resources	\$8,814,992.00	

3. PHA Policies Governing Eligibility, Selection, and Admissions

[24 CFR Part 903.7 9 (c)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete subcomponent 3A.

(1) Eligibility

- a. When does the PHA verify eligibility for admission to public housing? (select all that apply)
- _____ When families are within a certain number of being offered a unit: (state number)
- X When families are within a certain time of being offered a unit: (*No less than 5 working days*)
- _____ Other: (describe)
- b. Which non-income (screening) factors does the PHA use to establish eligibility for admission to public housing (select all that apply)?
- X Criminal or Drug-related activity
- X Rental history
- X Housekeeping
- X Other (describe) *Housekeeping*
- c. X Yes _____ No: Does the PHA request criminal records from local law enforcement agencies for screening purposes?
- d. _____ Yes X No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- e. _____ Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)

(2)Waiting List Organization

- a. Which methods does the PHA plan to use to organize its public housing waiting list (select all that apply)
- _____ Community-wide list
- _____ Sub-jurisdictional lists
- X Site-based waiting lists
- _____ Other (describe)
- b. Where may interested persons apply for admission to public housing?
- X PHA main administrative office
- _____ PHA development site management office
- _____ Other (list below)
- c. If the PHA plans to operate one or more site-based waiting lists in the coming year, answer each of the following questions; if not, skip to subsection (3)
- Assignment**
1. How many site-based waiting lists will the PHA operate in the coming year? **9**
2. X Yes _____ No: Are any or all of the PHA's site-based waiting lists new for the upcoming year (that is, they are not part of a previously-HUD-approved site based waiting list plan)?
- If yes, how many lists?
3. X Yes _____ No: May families be on more than one list simultaneously

If yes, how many lists?

4. Where can interested persons obtain more information about and sign up to be on the site-based waiting lists (select all that apply)?
- ☒ PHA main administrative office
 - ☐ All PHA development management offices
 - ☐ Management offices at developments with site-based waiting lists
 - ☐ At the development to which they would like to apply
 - ☐ Other (list below)

(3) Assignment

a. How many vacant unit choices are applicants ordinarily given before they fall to the bottom of or are removed from the waiting list? (select one)

- ☐ One
- ☒ Two
- ☐ Three or More

b. ☒ Yes ☐ No: Is this policy consistent across all waiting list types?

c. If answer to b is no, list variations for any other than the primary public housing waiting list/s for the PHA:

(4) Admissions Preferences

a. Income targeting:

☐ Yes ☒ No: Does the PHA plan to exceed the federal targeting requirements by targeting more than 40% of all new admissions to public housing to families at or below 30% of median area income?

b. Transfer policies:

In what circumstances will transfers take precedence over new admissions? (list below)

- ☒ Emergencies
- ☒ Overhoused
- ☐ Underhoused
- ☒ Medical justification
- ☒ Administrative reasons determined by the PHA (e.g., to permit modernization work)
- ☐ Resident choice: (state circumstances below)
- ☐ Other: (list below)

a. Preferences

☒ Yes ☐ No: Has the PHA established preferences for admission to public housing (other than date and time of application)? (If ?no? is selected, skip to subsection **(5) Occupancy**)

1. Which of the following admission preferences does the PHA plan to employ in the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences:

- ☒ Involuntary Displacement (Disaster, Government Action, Action of Housing
Owner, Inaccessibility, Property Disposition)
☒ Victims of domestic violence
☒ Substandard housing
☒ Homelessness
☒ High rent burden (rent is > 50 percent of income)

Other preferences: (select below)

- ☒ Working families and those unable to work because of age or disability
____ Veterans and veterans' families
____ Residents who live and/or work in the jurisdiction
____ Those enrolled currently in educational, training, or upward mobility
programs
____ Households that contribute to meeting income goals (broad range of
incomes)
____ Households that contribute to meeting income requirements (targeting)
____ Those previously enrolled in educational, training, or upward mobility
programs
____ Victims of reprisals or hate crimes
____ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a ?1? in the space that represents your first priority, a ?2? in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use ?1? more than once, ?2? more than once, etc.

____ Date and Time

Former Federal preferences:

- ____ Involuntary Displacement (Disaster, Government Action, Action of Housing
Owner, Inaccessibility, Property Disposition)
2 Victims of domestic violence
4 Substandard housing
5 Homelessness
____ High rent burden

Other preferences (select all that apply)

- 3** Working families and those unable to work because of age or disability
____ Veterans and veterans' families
____ Residents who live and/or work in the jurisdiction
____ Those enrolled currently in educational, training, or upward mobility
programs
____ Households that contribute to meeting income goals (broad range of
incomes)

- _____ Households that contribute to meeting income requirements (targeting)
 _____ Those previously enrolled in educational, training, or upward mobility programs
1 _____ Victims of reprisals or hate crimes
 _____ Other preference(s) (list below)

4. Relationship of preferences to income targeting requirements:

- _____ The PHA applies preferences within income tiers
X _____ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Occupancy

a. What reference materials can applicants and residents use to obtain information about the rules of occupancy of public housing (select all that apply)

- X _____ The PHA-resident lease
X _____ The PHA's Admissions and (Continued) Occupancy policy
X _____ PHA briefing seminars or written materials
X _____ Other source (list)

One on one orientation by resident managers and Group Orientation

b. How often must residents notify the PHA of changes in family composition? (select all that apply)

- X _____ At an annual reexamination and lease renewal
X _____ Any time family composition changes
X _____ At family request for revision
 _____ Other (list)

(6) Deconcentration and Income Mixing

a. X Yes _____ No: Did the PHA's analysis of its family (general occupancy) developments to determine concentrations of poverty indicate the need for measures to promote deconcentration of poverty or income mixing?

b. X No: Did the PHA adopt any changes to its **admissions policies** based on the results of the required analysis of the need to promote deconcentration of poverty or to assure income mixing?

c. If the answer to b was yes, what changes were adopted? (select all that apply)

- _____ Adoption of site-based waiting lists
 _____ If selected, list targeted developments below:

_____ Employing waiting list ?skipping? to achieve deconcentration of poverty or income mixing goals at targeted developments
 If selected, list targeted developments below:

_____ Employing new admission preferences at targeted developments
If selected, list targeted developments below:

_____ Other (list policies and developments targeted below)

d. ☒ No: Did the PHA adopt any changes to **other** policies based on the results of the required analysis of the need for deconcentration of poverty and income mixing?

e. If the answer to d was yes, how would you describe these changes? (select all that apply)

_____ Additional affirmative marketing
_____ Actions to improve the marketability of certain developments
_____ Adoption or adjustment of ceiling rents for certain developments
_____ Adoption of rent incentives to encourage deconcentration of poverty and income-mixing
_____ Other (list below)

f. Based on the results of the required analysis, in which developments will the PHA make special efforts to attract or retain higher-income families? (select all that apply)

☒ Not applicable: results of analysis did not indicate a need for such efforts
_____ List (any applicable) developments below:

g. Based on the results of the required analysis, in which developments will the PHA make special efforts to assure access for lower-income families? (select all that apply)

_____ Not applicable: results of analysis did not indicate a need for such efforts
_____ List (any applicable) developments below:

B. Section 8

Exemptions: PHAs that do not administer section 8 are not required to complete sub-component 3B.

Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Eligibility

a. What is the extent of screening conducted by the PHA? (select all that apply)

☒ Criminal or drug-related activity only to the extent required by law or regulation
_____ Criminal and drug-related activity, more extensively than required by law or regulation
_____ More general screening than criminal and drug-related activity (list factors below)
_____ Other (list below)

b. ☒ Yes _____ No: Does the PHA request criminal records from local law

enforcement agencies for screening purposes?

- c. ____ Yes X No: Does the PHA request criminal records from State law enforcement agencies for screening purposes?
- d. ____ Yes X No: Does the PHA access FBI criminal records from the FBI for screening purposes? (either directly or through an NCIC-authorized source)
- e. Indicate what kinds of information you share with prospective landlords? (select all that apply)
- X Criminal or drug-related activity
- X Other (describe below)

Housekeeping, Payment History & Conduct

(2) Waiting List Organization

- a. With which of the following program waiting lists is the section 8 tenant-based assistance waiting list merged? (select all that apply)
- X None
- _____ Federal public housing
- _____ Federal moderate rehabilitation
- _____ Federal project-based certificate program
- _____ Other federal or local program (list below)
- b. Where may interested persons apply for admission to section 8 tenant-based assistance? (select all that apply)
- X PHA main administrative office
- _____ Other (list below)

(3) Search Time

- a. X Yes ____ No: Does the PHA give extensions on standard 60-day period to search for a unit?

If yes, state the circumstances below:

Upon receipt of a written request for an extension by the family.

(4) Admissions Preferences

- a. Income targeting

X Yes ____ No Does the PHA plan to exceed the federal targeting requirements by targeting more than 75% of all new admissions to the section 8 program to families at or below 30% of median area income?

- b. Preferences

1. X Yes ____ No: Has the PHA established preferences for admission to section 8 tenant-based assistance? (other than date and time of application) (if no, skip to subcomponent **(5) Special purpose section 8 assistance programs**)

2. Which of the following admission preferences does the PHA plan to employ in

the coming year? (select all that apply from either former Federal preferences or other preferences)

Former Federal preferences

☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☒ Victims of domestic violence
☒ Substandard housing
☒ Homelessness
☐ High rent burden (rent is > 50 percent of income)

Other preferences (select all that apply)

☒ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in your jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility programs
☒ Households that contribute to meeting income goals (broad range of incomes)
☒ Households that contribute to meeting income requirements (targeting)
☐ Those previously enrolled in educational, training, or upward mobility programs
☒ Victims of reprisals or hate crimes
☐ Other preference(s) (list below)

3. If the PHA will employ admissions preferences, please prioritize by placing a ?1? in the space that represents your first priority, a ?2? in the box representing your second priority, and so on. If you give equal weight to one or more of these choices (either through an absolute hierarchy or through a point system), place the same number next to each. That means you can use ?1? more than once, ?2? more than once, etc.

☒ Date and Time

Former Federal preferences

☐ Involuntary Displacement (Disaster, Government Action, Action of Housing Owner, Inaccessibility, Property Disposition)
☐ 1 Victims of domestic violence
☐ 1 Substandard housing
☐ Homelessness
☐ High rent burden

Other preferences (select all that apply)

☐ Working families and those unable to work because of age or disability
☐ Veterans and veterans' families
☐ Residents who live and/or work in your jurisdiction
☐ Those enrolled currently in educational, training, or upward mobility

programs

☐ Households that contribute to meeting income goals (broad range of incomes)

☐ Households that contribute to meeting income requirements (targeting)

☐ Those previously enrolled in educational, training, or upward mobility programs

☐ Victims of reprisals or hate crimes

☐ Other preference(s) (list below)

4. Among applicants on the waiting list with equal preference status, how are applicants selected? (select one)

☒ Date and time of application

☐ Drawing (lottery) or other random choice technique

5. If the PHA plans to employ preferences for residents who live and/or work in the jurisdiction? (select one)

☐ This preference has previously been reviewed and approved by HUD

☐ The PHA requests approval for this preference through this PHA Plan

6. Relationship of preferences to income targeting requirements: (select one)

☐ The PHA applies preferences within income tiers

☒ Not applicable: the pool of applicant families ensures that the PHA will meet income targeting requirements

(5) Special Purpose Section 8 Assistance Programs

a. In which documents or other reference materials are the policies governing eligibility, selection, and admissions to any special-purpose section 8 program administered by the PHA contained? (select all that apply)

☒ The Section 8 Administrative Plan

☒ Briefing sessions and written materials

☐ Other (list below)

b. How does the PHA announce the availability of any special-purpose section 8 programs to the public?

☒ Through published notices

☐ Other (list below)

4. PHA Rent Determination Policies

[24 CFR Part 903.7 9 (d)]

A. Public Housing

Exemptions: PHAs that do not administer public housing are not required to complete sub-component 4A.

(1) Income Based Rent Policies

Describe the PHA's income based rent setting policy/ies for public housing using, including discretionary (that is, not required by statute or regulation) income disregards and exclusions, in the appropriate spaces below.

a. Use of discretionary policies: (select one)

☒ The PHA will not employ any discretionary rent-setting policies for income based rent in public housing. Income-based rents are set at the higher of 30% of adjusted monthly income, 10% of unadjusted monthly income, the welfare rent, or minimum rent (less HUD mandatory deductions and exclusions). (If selected, skip to sub-component (2))

---or---

☐ The PHA employs discretionary policies for determining income based rent (If selected, continue to question b.)

b. Minimum Rent

1. What amount best reflects the PHA's minimum rent? (select one)

☐ \$0
☐ \$1-\$25
☒ \$26-\$50

2. ☐ Yes ☒ No: Has the PHA adopted any discretionary minimum rent hardship exemption policies?

3. If yes to question 2, list these policies below:

a. Rents set at less than 30% than adjusted income

1. ☒ Yes ☐ No: Does the PHA plan to charge rents at a fixed amount or percentage less than 30% of adjusted income?

2. If yes to above, list the amounts or percentages charged and the circumstances under which these will be used below:
Not established yet.

d. Which of the discretionary (optional) deductions and/or exclusions policies does the PHA plan to employ (select all that apply)

☒ For the earned income of a previously unemployed household member
☐ For increases in earned income
☐ Fixed amount (other than general rent-setting policy)
If yes, state amount/s and circumstances below:

☐ Fixed percentage (other than general rent-setting policy)
If yes, state percentage/s and circumstances below:

☐ For household heads

- ☒ For other family members
☒ For transportation expenses
☐ For the non-reimbursed medical expenses of non-disabled or non-elderly families
☐ Other (describe below)

e. Ceiling rents

1. Do you have ceiling rents? (rents set at a level lower than 30% of adjusted income) (select one)

- ☒ Yes for all developments
☐ Yes but only for some developments
☐ No

2. For which kinds of developments are ceiling rents in place? (select all that apply)

- ☒ For all developments
☐ For all general occupancy developments (not elderly or disabled or elderly only)
☐ For specified general occupancy developments
☐ For certain parts of developments; e.g., the high-rise portion
☐ For certain size units; e.g., larger bedroom sizes
☐ Other (list below)

3. Select the space or spaces that best describe how you arrive at ceiling rents (select all that apply)

- ☐ Market comparability study
☒ Fair market rents (FMR)
☐ 95th percentile rents
☐ 75 percent of operating costs
☐ 100 percent of operating costs for general occupancy (family) developments
☐ Operating costs plus debt service
☐ The ?rental value? of the unit
☐ Other (list below)

f. Rent re-determinations:

1. Between income reexaminations, how often must tenants report changes in income or family composition to the PHA such that the changes result in an adjustment to rent? (select all that apply)

- ☐ Never
☒ At family option
☒ Any time the family experiences an income increase
☐ Any time a family experiences an income increase above a threshold amount or percentage: (if selected, specify threshold)_____
☐ Other (list below)

- g. ☒ Yes ☐ No: Does the PHA plan to implement individual savings accounts for residents (ISAs) as an alternative to the required 12 month disallowance of earned income and phasing in of rent increases in the next year?

(2) Flat Rents

1. In setting the market-based flat rents, what sources of information did the PHA use to establish comparability? (select all that apply.)

☒ The section 8 rent reasonableness study of comparable housing
☐ Survey of rents listed in local newspaper
☐ Survey of similar unassisted units in the neighborhood
☐ Other (list/describe below)

B. Section 8 Tenant-Based Assistance

Exemptions: PHAs that do not administer Section 8 tenant-based assistance are not required to complete sub-component 4B. Unless otherwise specified, all questions in this section apply only to the tenant-based section 8 assistance program (vouchers, and until completely merged into the voucher program, certificates).

(1) Payment Standards

Describe the voucher payment standards and policies.

- a. What is the PHA's payment standard? (select the category that best describes your standard)

☐ At or above 90% but below 100% of FMR
☒ 100% of FMR
☐ Above 100% but at or below 110% of FMR
☐ Above 110% of FMR (if HUD approved; describe circumstances below)

- b. If the payment standard is lower than FMR, why has the PHA selected this standard? (select all that apply)

☐ FMRs are adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ The PHA has chosen to serve additional families by lowering the payment standard
☐ Reflects market or submarket
☐ Other (list below)

- c. If the payment standard is higher than FMR, why has the PHA chosen this level? (select all that apply)

☐ FMRs are not adequate to ensure success among assisted families in the PHA's segment of the FMR area
☐ Reflects market or submarket
☐ To increase housing options for families

_____ Other (list below)

d. How often are payment standards reevaluated for adequacy? (select one)

 X Annually

_____ Other (list below)

e. What factors will the PHA consider in its assessment of the adequacy of its payment standard? (select all that apply)

 X Success rates of assisted families

 Rent burdens of assisted families

 X Other (list below)

Rent Reasonableness Survey

(2) Minimum Rent

a. What amount best reflects the PHA's minimum rent? (select one)

_____ \$0

_____ \$1-\$25

 X \$26-\$50

b. Yes X No: Has the PHA adopted any discretionary minimum rent hardship exemption policies? (if yes, list below)

5. Operations and Management

[24 CFR Part 903.7 9 (e)]

Exemptions from Component 5: High performing and small PHAs are not required to complete this section. Section 8 only PHAs must complete parts A, B, and C(2)

A. PHA Management Structure

Select one)

 X An organization chart showing the PHA's management structure and organization is attached.

_____ A brief description of the management structure and organization of the PHA follows:

B. HUD Programs Under PHA Management

List Federal programs administered by the PHA, number of families served at the beginning of the upcoming fiscal year, and expected turnover in each. (Use "NA" to indicate that the PHA does not operate any of the programs listed below.)

Program Name	Units or Families Served at Year Beginning	Expected Turnover
Public Housing	827	220

Section 8 Vouchers	709	200
Section 8 Certificates	0	0
Section 8 Mod Rehab	0	0
Special Purpose Section 8 Certificates/Vouchers (list individually)	0	N/A
Public Housing Drug Elimination Program (PHDEP)	827	N/A
Other Federal Programs(list individually)	N/A	N/A

C. Management and Maintenance Policies

List the PHA's public housing management and maintenance policy documents, manuals and handbooks that contain the Agency's rules, standards, and policies that govern maintenance and management of public housing, including a description of any measures necessary for the prevention or eradication of pest infestation (which includes cockroach infestation) and the policies governing Section 8 management.

(1) Public Housing Maintenance and Management: (list below)

- A. Admissions & Occupancy Policy
- B. Blood Born Disease Policy
- C. Capitalization Policy
- D. Check Signing Policy
- E. Disposition Policy
- F. Drug Free Work Place Policy
- G. Equal Housing Opportunity Policy
- H. Ethics Policy
- I. Facilities Use Policy
- J. Frud Transfer Policy
- K. Hazardous Materials Policy
- L. Investment Policy
- M. Natural Disaster Response Guidelines
- N. Personnel Policy
- O. Procurement Policy

(2) Section 8 Management: (list below)

- A. Administrative Plan

6. PHA Grievance Procedures

[24 CFR Part 903.7 9 (f)]

Exemptions from component 6: High performing PHAs are not required to complete component 6. Section 8-Only PHAs are exempt from sub-component 6A.

A. Public Housing

1. ☐ Yes ☒ No: Has the PHA established any written grievance procedures in addition to federal

requirements found at 24 CFR Part 966, Subpart B, for residents of public housing?

If yes, list additions to federal requirements below:

2. Which PHA office should residents or applicants to public housing contact to initiate the PHA grievance process? (select all that apply)

☒ PHA main administrative office
☐ PHA development management offices
☐ Other (list below)

B. Section 8 Tenant-Based Assistance

1. ☒ Yes ☐ No: Has the PHA established informal review procedures for applicants to the Section 8 tenant-based assistance program and informal hearing procedures for families assisted by the Section 8 tenant-based assistance program in addition to federal requirements found at 24 CFR 982?

If yes, list additions to federal requirements below:

Informal hearing with managers

2. Which PHA office should applicants or assisted families contact to initiate the informal review and informal hearing processes? (select all that apply)

☒ PHA main administrative office
☐ Other (list below)

7. Capital Improvement Needs

[24 CFR Part 903.7 9 (g)]

Exemptions from Component 7: Section 8 only PHAs are not required to complete this component and may skip to Component 8.

A. Capital Fund Activities

Exemptions from sub-component 7A: PHAs that will not participate in the Capital Fund Program may skip to component 7B. All other PHAs must complete 7A as instructed.

(1) Capital Fund Program Annual Statement

Using parts I, II, and III of the Annual Statement for the Capital Fund Program (CFP), identify capital activities the PHA is proposing for the upcoming year to ensure long-term physical and social viability of its public housing developments. This statement can be completed by using the CFP Annual Statement tables provided in the table library at the end of the PHA Plan template **OR**, at the PHA's option, by completing and attaching a properly updated HUD-52837.

Select one:

☒ The Capital Fund Program Annual Statement is provided as an attachment to the PHA Plan at Attachment (state name) **Fort Pierce Housing Authority**
-or-

☐ The Capital Fund Program Annual Statement is provided below: (if selected, copy the CFP Annual Statement from the Table Library and insert here)

(2) Optional 5-Year Action Plan

Agencies are encouraged to include a 5-Year Action Plan covering capital work items. This statement can be completed by using the 5 Year Action Plan table provided in the table library at the end of the PHA Plan template **OR** by completing and attaching a properly updated HUD-52834.

a. ☒ Yes ☐ No: Is the PHA providing an optional 5-Year Action Plan for the Capital Fund? (if no, skip to sub-component 7B)

b. If yes to question a, select one:

☒ The Capital Fund Program 5-Year Action Plan is provided as an attachment to the PHA Plan at Attachment (state name
-or-

☐ The Capital Fund Program 5-Year Action Plan is provided below: (if selected, copy the CFP optional 5 Year Action Plan from the Table Library and insert here)

B. HOPE VI and Public Housing Development and Replacement Activities (Non-Capital Fund)

Applicability of sub-component 7B: All PHAs administering public housing. Identify any approved HOPE VI and/or public housing development or replacement activities not described in the Capital Fund Program Annual Statement.

☐ Yes ☒ No: a) Has the PHA received a HOPE VI revitalization grant? (if no, skip to question c; if yes, provide responses to question b for each grant, copying and pasting HOPE VI revitalization grant (complete one set of questions for

each grant)

1. Development name:

2. Development (project) number:

3. Status of grant: (select the statement that best describes the current status)

☐ Revitalization Plan under development

☐ Revitalization Plan submitted, pending approval

☐ Revitalization Plan approved

☐ Activities pursuant to an approved Revitalization Plan underway

☒ Yes ☐ No: c) Does the PHA plan to apply for a HOPE VI Revitalization grant in the Plan year? If yes, list development name/s below:

☐ Yes ☒ No: d) Will the PHA be engaging in any mixed-finance development activities for public housing in the Plan year? If yes, list developments or activities below:

☐ Yes ☒ No: e) Will the PHA be conducting any other public housing development or replacement activities not discussed in the Capital Fund Program Annual Statement? If yes, list developments or activities below:

8. Demolition and Disposition

[24 CFR Part 903.7 9 (h)]

Applicability of component 8: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Does the PHA plan to conduct any demolition or disposition activities (pursuant to section 18 of the U.S. Housing Act of 1937 (42 U.S.C. 1437p)) in the plan Fiscal Year? (If ?No?, skip to component 9; if ?yes?, complete one activity description for each development.)

2. Activity Description

- ☐ Yes ☐ No: Has the PHA provided the activities description information in the optional Public Housing Asset Management Table? (If ?yes?, skip to component 9. If ?No?, complete the Activity Description table below.)

Demolition/Disposition Activity Description
1a. Development name:
1b. Development (project) number:
2. Activity type: <input type="checkbox"/> Demolition <input type="checkbox"/> Disposition
3. Application status (select one) <input type="checkbox"/> Approved <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application
4. Date application approved, submitted, or planned for submission: (DD/MM/YY)
5. Number of units affected: Coverage of action (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development
7. Timeline for activity: a. Actual or projected start date of activity: b. Projected end date of activity:

9. Designation of Public Housing for Occupancy by Elderly Families or Families with Disabilities or Elderly Families and Families with Disabilities

[24 CFR Part 903.7 9 (i)]

Exemptions from Component 9: Section 8 only PHAs are not required to complete this section.

1. ☐ Yes ☒ No: Has the PHA designated or applied for approval to designate or does the PHA plan to apply to designate any public housing for occupancy only by the elderly families or only by families with disabilities, or by elderly families and families with disabilities or will apply for designation for occupancy by only elderly families or only families with disabilities, or by elderly families and families with disabilities as provided by section 7 of the U.S. Housing Act of 1937 (42 U.S.C. 1437e) in the upcoming fiscal year? (If ?No?, skip to component 10. If ?yes?, complete one activity description for each development, unless the PHA is eligible to complete a streamlined submission; PHAs completing streamlined submissions may skip to component 10.)

2. Activity Description

 Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If yes ?, skip to component 10. If No ?, complete the Activity Description table below.

Designation of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. Designation type:	
<u> </u> Occupancy by only the elderly	
<u> </u> Occupancy by families with disabilities	
<u> </u> Occupancy by only elderly families and families with disabilities	
3. Application status (select one)	
<u> </u> Approved, included in the PHA's Designation Plan	
<u> </u> Submitted, pending approval	
<u> </u> Planned application	
4. Date this designation approved, submitted, or planned for submission: (DD/MM/YY)	
5. If approved, will this designation constitute a (select one)	
<u> </u> New Designation Plan	
<u> </u> Revision of a previously-approved Designation Plan?	
6.. Number of units affected:	
7. Coverage of action (select one)	
<u> </u> Part of the development	
<u> </u> Total development	

10. Conversion of Public Housing to Tenant-Based Assistance

[24 CFR Part 903.7 9 (j)]

Exemptions from Component 10; Section 8 only PHAs are not required to complete this section.

A. Assessments of Reasonable Revitalization Pursuant to section 202 of the HUD FY 1996 HUD Appropriations Act

1. Yes X No: Have any of the PHA's developments or portions of developments been identified by HUD or the PHA as covered under section 202 of the HUD FY 1996 HUD Appropriations Act? (If No ?, skip to component 11; if yes ?, complete one activity description for each identified development, unless eligible to complete a streamlined submission. PHAs completing streamlined submissions may skip to component 11.)

2. Activity Description

 Yes No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? If yes ?, skip to component 11. If No ?, complete the Activity Description table below.

Conversion of Public Housing Activity Description	
1a. Development name:	
1b. Development (project) number:	
2. What is the status of the required assessment?	<input type="checkbox"/> Assessment underway <input type="checkbox"/> Assessment results submitted to HUD <input type="checkbox"/> Assessment results approved by HUD (if marked, proceed to next question) <input type="checkbox"/> Other (explain below)
3. <input type="checkbox"/> Yes <input type="checkbox"/> No: Is a Conversion Plan required? (If yes, go to block 4; if no, go to block 5.)	
4. Status of Conversion Plan (select the statement that best describes the current status)	<input type="checkbox"/> Conversion Plan in development <input type="checkbox"/> Conversion Plan submitted to HUD on: (DD/MM/YYYY) <input type="checkbox"/> Conversion Plan approved by HUD on: (DD/MM/YYYY) <input type="checkbox"/> Activities pursuant to HUD-approved Conversion Plan underway
5. Description of how requirements of Section 202 are being satisfied by means other than conversion (select one)	<input type="checkbox"/> Units addressed in a pending or approved demolition application (date submitted or approved) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI demolition application (date submitted or approved) <input type="checkbox"/> Units addressed in a pending or approved HOPE VI revitalization Plan (date submitted or approved) <input type="checkbox"/> Requirements no longer applicable: site now has less than 10 percent <input type="checkbox"/> Requirements no longer applicable: site now has less than 300 units <input type="checkbox"/> Other: (describe below)

B. Reserved for Conversions pursuant to Section 22 of the U.S. Housing Act of 1937

C. Reserved for Conversions pursuant to Section 33 of the U.S. Housing Act of 1937

11. Homeownership Programs Administered by the PHA

[24 CFR Part 903.7 9 (k)]

A. Public Housing

Exemptions from Component 11A: Section 8 only PHAs are not required to complete 11A.

1. ☐ Yes ☒ No: Does the PHA administer any homeownership programs administered by the PHA under an approved section 5(h) homeownership program (42 U.S.C. 1437c(h)), or an approved HOPE I program (42 U.S.C. 1437aaa) or has the PHA applied or plan to apply to administer any homeownership programs under section 5(h), the HOPE I program, or section 32 of the U.S. Housing Act of 1937 (42 U.S.C. 1437z-4). (If ?No?, skip to component 11B; if ?yes?, complete one activity description for each applicable program/plan, unless eligible to complete a streamlined submission due to **small PHA** or **high**

performing PHA status. PHAs completing streamlined submissions may skip to component 11B.)

2. Activity Description

☐ Yes ☐ No: Has the PHA provided all required activity description information for this component in the **optional** Public Housing Asset Management Table? (If ?yes?, skip to component 12. If ?No?, complete the Activity Description table below.)

Public Housing Homeownership Activity Description (Complete one for each development affected)	
1a. Development name: 1b. Development (project) number:	
2. Federal Program authority: <input type="checkbox"/> 5(h) <input type="checkbox"/> Turnkey III <input type="checkbox"/> Section 32 of the USHA of 1937 (effective 10/1/99)	
3. Application status: (select one) <input type="checkbox"/> Approved, included in the PHA ?s Homeownership Plan/Program <input type="checkbox"/> Submitted, pending approval <input type="checkbox"/> Planned application	
4. Date Homeownership Plan/Program approved, submitted, or planned for submission: (DD/MM/YYYY)	
5. Number of units affected:	
6. Coverage of action: (select one) <input type="checkbox"/> Part of the development <input type="checkbox"/> Total development	

B. Section 8 Tenant Based Assistance

1. ☒ Yes ☐ No: Does the PHA plan to administer a Section 8 Homeownership program pursuant to Section 8(y) of the U.S.H.A. of 1937, as implemented by 24 CFR part 982 ? (If ?No?, skip to component 12; if ?yes?, describe each program using the table below (copy and complete questions for each program identified), unless the PHA is eligible to complete a streamlined submission due to high performer status. **High performing PHAs** may skip to component 12.)

2. Program Description:

a. Size of Program

☒ Yes ☐ No: Will the PHA limit the number of families participating in the section 8 homeownership option?

If the answer to the question above was yes, which statement best describes the number of participants? (select one)

☒ 25 or fewer participants

- ☐ 26 - 50 participants
☐ 51 to 100 participants
☐ more than 100 participants

b. PHA-established eligibility criteria

☒ Yes ☐ No: Will the PHA's program have eligibility criteria for participation in its Section 8 Homeownership Option program in addition to HUD criteria?
 If yes, list criteria below:

12. PHA Community Service and Self-sufficiency Programs

[24 CFR Part 903.7 9 (l)]

Exemptions from Component 12: High performing and small PHAs are not required to complete this component. Section 8-Only PHAs are not required to complete sub-component C.

A. PHA Coordination with the Welfare (TANF) Agency

1. Cooperative agreements:

☒ Yes ☐ No: Has the PHA entered into a cooperative agreement with the TANF Agency, to share information and/or target supportive services (as contemplated by section 12(d)(7) of the Housing Act of 1937)?
 If yes, what was the date that agreement was signed? 06/01/99

2. Other coordination efforts between the PHA and TANF agency (select all that apply)

- ☒ Client referrals
☒ Information sharing regarding mutual clients (for rent determinations and otherwise)
☒ Coordinate the provision of specific social and self-sufficiency services and programs to eligible families
☒ Jointly administer programs
☒ Partner to administer a HUD Welfare-to-Work voucher program
☐ Joint administration of other demonstration program
☒ Working with the local TANF agency and application for the Family Unification Voucher program. The first year applied for we were unsuccessful. Second year same. We want to apply again and they agree.

B. Services and programs offered to residents and participants

(1) General

a. Self-Sufficiency Policies

Which, if any of the following discretionary policies will the PHA employ to enhance the economic and social self-sufficiency of assisted families in the following areas? (select all that apply)

- ☒ Public housing rent determination policies
☐ Public housing admissions policies
☐ Section 8 admissions policies
☐ Preference in admission to section 8 for certain public housing families
☐ Preferences for families working or engaging in training or education programs for non-housing programs operated or coordinated by the PHA.
☒ Preference/eligibility for public housing homeownership option participation

X Preference/eligibility for section 8 homeownership option participation
 Other policies (list below)

b. Economic and Social self-sufficiency programs

 X Yes No: Does the PHA coordinate, promote or provide any programs to enhance the economic and social self-sufficiency of residents? (If ?yes?, complete the following table; if ?no? skip to sub-component 2, Family Self Sufficiency Programs. The position of the table may be altered to facilitate its use.)

Services and Programs				
Program Name & Description (including location, if appropriate)	Estimated Size	Allocation Method (waiting list/random selection/specific criteria/other)	Access (development office / PHA main office / other provider name)	Eligibility (public housing or section 8 participants or both)
Family Self Sufficiency Program	60	waiting list	main office	both

(2) Family Self Sufficiency program/s

a. Participation Description

Family Self Sufficiency (FSS) Participation		
Program	Required Number of Participants (start of FY 2001 Estimate)	Actual Number of Participants 04/01/2001
Public Housing	0	13
Section 8	25	47

b. X Yes No: If the PHA is not maintaining the minimum program size required by HUD, does the most recent FSS Action Plan address the steps the PHA plans to take to achieve at least the minimum program size?
If no, list steps the PHA will take below.

C. Welfare Benefit Reductions

1. The PHA is complying with the statutory requirements of section 12(d) of the U.S. Housing Act of 1937 (relating to the treatment of income changes resulting from welfare program requirements) by: (select all that apply)

☒ Adopting appropriate changes to the PHA 's public housing rent determination policies and train staff to carry out those policies
☒ Informing residents of new policy on admission and reexamination
☒ Actively notifying residents of new policy at times in addition to admission and reexamination.
☒ Establishing or pursuing a cooperative agreement with all appropriate TANF agencies regarding the exchange of information and coordination of services
☒ Establishing a protocol for exchange of information with all appropriate TANF agencies
____ Other: (list below)

D. Reserved for Community Service Requirement pursuant to section 12(c) of the U.S. Housing Act of 1937

13. PHA Safety and Crime Prevention Measures

[24 CFR Part 903.7 9 (m)]

Exemptions from Component 13: High performing and small PHAs not participating in PHDEP and Section 8 Only PHAs may skip to component 15. High Performing and small PHAs that are participating in PHDEP and are submitting a PHDEP Plan with this PHA Plan may skip to sub-component D.

A. Need for measures to ensure the safety of public housing residents

1. Describe the need for measures to ensure the safety of public housing residents (select all that apply)

☒ High incidence of violent and/or drug-related crime in some or all of the PHA's developments
☒ High incidence of violent and/or drug-related crime in the areas surrounding or adjacent to the PHA's developments
☒ Residents fearful for their safety and/or the safety of their children
☒ Observed lower-level crime, vandalism and/or graffiti
☒ People on waiting list unwilling to move into one or more developments due to perceived and/or actual levels of violent and/or drug-related crime
____ Other (describe below)

2. What information or data did the PHA used to determine the need for PHA actions to improve safety of residents (select all that apply).

☒ Safety and security survey of residents
☒ Analysis of crime statistics over time for crimes committed ?in and around? public housing authority
☒ Analysis of cost trends over time for repair of vandalism and removal of graffiti
☒ Resident reports
☒ PHA employee reports
☒ Police reports
☒ Demonstrable, quantifiable success with previous or ongoing anticrime/anti drug programs

_____ Other (describe below)

3. Which developments are most affected? (list below)

B. Crime and Drug Prevention activities the PHA has undertaken or plans to undertake in the next PHA fiscal year

1. List the crime prevention activities the PHA has undertaken or plans to undertake: (select all that apply)

☒ Contracting with outside and/or resident organizations for the provision of crime- and/or drug-prevention activities

☒ Crime Prevention Through Environmental Design

☒ Activities targeted to at-risk youth, adults, or seniors

☒ Volunteer Resident Patrol/Block Watchers Program

☒ Other (describe below)

Boys and Girls Club, PAL

2. Which developments are most affected? (list below)

Garden Terrace & Garden Terrace Annex

Eldorado Terrace

Lincoln Investments

C. Coordination between PHA and the police

1. Describe the coordination between the PHA and the appropriate police precincts for carrying out crime prevention measures and activities: (select all that apply)

☒ Police involvement in development, implementation, and/or ongoing evaluation of drug-elimination plan

☒ Police provide crime data to housing authority staff for analysis and action

☒ Police have established a physical presence on housing authority property (e.g., community policing office, officer in residence)

☒ Police regularly testify in and otherwise support eviction cases

☒ Police regularly meet with the PHA management and residents

☒ Agreement between PHA and local law enforcement agency for provision of above-baseline law enforcement services

☒ Other activities (list below)

2. Which developments are most affected? (list below)

Garden Terrace & Garden Terrace Annex

Eldorado Terrace

Lincoln Investments

D. Additional information as required by PHDEP/PHDEP Plan

PHAs eligible for FY 2000 PHDEP funds must provide a PHDEP Plan meeting specified requirements prior to receipt of PHDEP funds.

☒ Yes _____ No: Is the PHA eligible to participate in the PHDEP in the fiscal year covered by this PHA Plan?

☒ Yes _____ No: Has the PHA included the PHDEP Plan for FY 2000 in this PHA Plan?

☒ Yes _____ No: This PHDEP Plan is an Attachment. (Attachment Filename: _____)

14. RESERVED FOR PET POLICY

903.7 9 (n)]

24 CFR Part

15. Civil Rights Certifications

[24 CFR Part 903.7 9 (o)]

Civil rights certifications are included in the PHA Plan Certifications of Compliance with the PHA Plans and Related Regulations.

16. Fiscal Audit

[24 CFR Part 903.7 9 (p)]

1. ☒ Yes ☐ No: Is the PHA required to have an audit conducted under section 5(h)(2) of the U.S. Housing Act of 1937 (42 U.S.C. 1437c(h))?
(If no, skip to component 17.)
2. ☒ Yes ☐ No: Was the most recent fiscal audit submitted to HUD?
3. ☒ Yes ☐ No: Were there any findings as the result of that audit?
4. ☐ Yes ☒ No: If there were any findings, do any remain unresolved?
If yes, how many unresolved findings remain? _____
5. ☒ Yes ☐ No: Have responses to any unresolved findings been submitted to HUD?
If not, when are they due (state below)? _____

17. PHA Asset Management

[24 CFR Part 903.7 9 (q)]

Exemptions from component 17: Section 8 Only PHAs are not required to complete this component. High performing and small PHAs are not required to complete this component.

1. ☒ Yes ☐ No: Is the PHA engaging in any activities that will contribute to the long-term asset management of its public housing stock, including how the Agency will plan for long-term operating, capital investment, rehabilitation, modernization, disposition, and other needs that have **not** been addressed elsewhere in this PHA Plan?
2. What types of asset management activities will the PHA undertake? (select all that apply)
☐ Not applicable
☐ Private management
☐ Development-based accounting
☒ Comprehensive stock assessment
☐ Other: (list below) _____
3. ☐ Yes ☒ No: Has the PHA included descriptions of asset management activities in the **optional** Public Housing Asset Management Table?

18. Other Information

[24 CFR Part 903.7 9 (r)]

A. Resident Advisory Board Recommendations

1. ____ Yes X No: Did the PHA receive any comments on the PHA Plan from the Resident Advisory Board/s?

2. If yes, the comments are: (if comments were received, the PHA **MUST** select one)

____ Attached at Attachment (File name)

____ Provided below:

3. In what manner did the PHA address those comments? (select all that apply)

X Considered comments, but determined that no changes to the PHA Plan were necessary.

____ The PHA changed portions of the PHA Plan in response to comments

____ List changes below:

____ Other: (list below)

B. Description of Election process for Residents on the PHA Board

1. ____ Yes X No: Does the PHA meet the exemption criteria provided section 2(b)(2) of the U.S. Housing Act of 1937? (If no, continue to question 2; if yes, skip to sub-component C.)

2. ____ Yes X No: Was the resident who serves on the PHA Board elected by the residents? (If yes, continue to question 3; if no, skip to sub-component C.)

3. Description of Resident Election Process

a. Nomination of candidates for place on the ballot: (select all that apply)

X Candidates were nominated by resident and assisted family organizations

X Candidates could be nominated by any adult recipient of PHA assistance

X Self-nomination: Candidates registered with the PHA and requested a place on ballot

____ Other: (describe)

b. Eligible candidates: (select one)

X Any recipient of PHA assistance

X Any head of household receiving PHA assistance

X Any adult recipient of PHA assistance

X Any adult member of a resident or assisted family organization

____ Other (list)

c. Eligible voters: (select all that apply)

____ All adult recipients of PHA assistance (public housing and section 8 tenant-based assistance)

____ Representatives of all PHA resident and assisted family organizations

____ Other (list)

C. Statement of Consistency with the Consolidated Plan

For each applicable Consolidated Plan, make the following statement (copy questions as many times as necessary).

1. Consolidated Plan jurisdiction: (provide name here)

2. The PHA has taken the following steps to ensure consistency of this PHA Plan with the Consolidated Plan for the jurisdiction: (select all that apply) *The City of Fort Pierce*

_____ The PHA has based its statement of needs of families in the jurisdiction on the needs expressed in the Consolidated Plan/s.

 X The PHA has participated in any consultation process organized and offered by the Consolidated Plan agency in the development of the Consolidated Plan.

 X The PHA has consulted with the Consolidated Plan agency during the development of this PHA Plan.

_____ Activities to be undertaken by the PHA in the coming year are consistent with the initiatives contained in the Consolidated Plan. (list below)

_____ Other: (list below)

4. The Consolidated Plan of the jurisdiction supports the PHA Plan with the following actions and commitments: (describe below)

D. Other Information Required by HUD

Use this section to provide any additional information requested by HUD.

Attachments

Use this section to provide any additional attachments referenced in the Plans.

**PHA Plan
Table Library**

**Component 7
Capital Fund Program Annual Statement
Parts I, II, and III**

Annual Statement		
Capital Fund Program (CFP) Part I: Summary		
Line No.	Summary by Development Account	Total Estimated
1	Total Non-CGP Funds	
2	1406 Operations	163,228
3	1408 Management Improvements	178,704
4	1410 Administration	163,228
5	1411 Audit	
6	1415 Liquidated Damages	
7	1430 Fees and Costs	75,000
8	1440 Site Acquisition	
9	1450 Site Improvement	64,700
10	1460 Dwelling Structures	822,974
11	1465.1 Dwelling Equipment-Nonexpendable	25,000
12	1470 Nondwelling Structures	15,000
13	1475 Nondwelling Equipment	14,452
14	1485 Demolition	
15	1490 Replacement Reserve	
16	1492 Moving to Work Demonstration	
17	1495.1 Relocation Costs	45,000
18	1498 Mod Used for Development	
19	1502 Contingency	65,000
20	Amount of Annual Grant (Sum of lines 2-19)	1,632,286
21	Amount of line 20 Related to LBP Activities	
22	Amount of line 20 Related to Section 504 Compliance	
23	Amount of line 20 Related to Security	
24	Amount of line 20 Related to Energy Conservation	560,000

Annual Statement			
Capital Fund Program (CFP) Part II: Supporting Table			
Development Number/Name HA-Wide	General Description of Major Work Categories	Development Account Number	Total Estimated Cost
HA Wide	Operations	1406	163,228
	1. General Management Improvements	1408	48,000
	2. Skills training for staff &		23,000

Table Library

	3. Technical assistance for resident		30,000
	4. Resident Education and Training		20,000
	5. Resident Econom. Devel & Res		30,000
	6. HTVN Programming		6,000
	7. Space rental for R.C. & equip. purc		8,000
	8. Economic Dev revolving loan fund		13,704
	SUBTOTAL		178,704
FL 41-05	Modernization of development/ soffit, facia	1460	350,5000
FL41-11 C	Mod.evelopment/Building envelope building interior	1460	38,000 225,000
FL41-8	Mod of development Window (7 floors)	1460	209,474
	SUBTOTAL		822,974

[illegible]

Table Library

Table Library

Optional Table for 5-Year Action Plan for Capital Fund (Component 7)

Complete one table for each development in which work is planned in the next 5 PHA fiscal years. Complete a table for any PHA-wide physical or management improvements planned in the next 5 PHA fiscal year. Copy this table as many times as necessary. Note: PHAs need not include information from Year One of the 5-Year cycle, because this information is included in the Capital Fund Program Annual Statement.

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
FL 41-1	Wildwood Terrace	1.	.016%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Building Interior (10 Units)			92,320	2003
Total estimated cost over next 5 years				

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
41-1	Wildwood Terrace	1	.016%	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Modernization of Development (60 units) Building Envelope Building Interior Electrical Mechanical			822,974	2005
Total estimated cost over next 5 years				

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
FL 41-2	Garden Terrace	1	.0059	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Garden Terrace (40 Units) Modernization of Development Building Envelope Building Interior Electrical Mechanical			822,974	2002
Total estimated cost over next 5 years				

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
FL41-3	Lawnwood Terrace	0	0	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	
Lawnwood Terrace (70 units) Building Interior			250,654	2003

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
FL 41-4	Garden Terrace Annex	1	.016	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Modernization of Development Building Envelope Building Interior Electrical Mechanical			822,974	2004
Total estimated cost over next 5 years				

Optional 5-Year Action Plan Tables				
Development Number	Development Name (or indicate PHA wide)	Number Vacant Units	% Vacancies in Development	
41-6	Lawnwood Terrace Annex	0	0	
Description of Needed Physical Improvements or Management Improvements			Estimated Cost	Planned Start Date (HA Fiscal Year)
Building Interior (14 units)			90,000	2003
Total estimated cost over next 5 years				

HRD-50075

OMB
Approval No: 2577-0226
Expires: 03/31/2002

RESIDENT COUNCIL EXECUTIVE BOARD MEMBERS

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Annual Statement / Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of The City of Fort Pierce		Grant Type and Number Capital Fund Program Grant No: FL14PO4150101 Replacement Housing Factor Grant No:		FEDERAL FY of Grant: 2001	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters / Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost Original	Revised	Total Actual Cost Obligated	Expended
1	Total non – CFP Funds				
2	1406 Operations	166,373.			
3	1408 Management Improvements Soft Costs	178,704.			
	Management Improvements Hard Costs				
4	1410 Administration	166,374.			
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs	75,000.			
8	1440 Site Acquisition				
9	1450 Site Improvements	64,700.			
10	1460 Dwelling Structures	848,130.			
11	1465.1 Dwelling Equipment-Nonexpendable	25,000.			
12	1470 Non dwelling Structures	15,000.			
13	1475 Non dwelling Equipment	14,452.			
14	1485 Demolition				
15	1490 Replacement Reserve				
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs	45,000.			
18	1499 Development Activities				
19	1502 Contingencies	65,000.			
XX	Amount of Annual Grant: (sum of lines...)	1,663,732.			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs				
	Amount of line XX Related to Energy Conservation Measures	560,000.			
	Collateralization Expenses or Debt Service				
Signature of Executive Director: (MM / DD / YY):		Signature of Public Housing Director / Office of Native American Programs Administrator: (MM / DD / YY)			

Annual Statement / Performance and Evaluation Report					
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF) Part 1: Summary					
PHA Name: Housing Authority of The City of Fort Pierce		Grant Type and Number Capital Fund Program Grant No: Replacement Housing Factor Grant No: FL14RO4150101		FEDERAL FY of Grant: 2001	
<input checked="" type="checkbox"/> Original Annual Statement <input type="checkbox"/> Reserve for Disasters / Emergencies <input type="checkbox"/> Revised Annual Statement (revision no:) <input type="checkbox"/> Performance and Evaluation Report for Period Ending: <input type="checkbox"/> Final Performance and Evaluation Report					
Line No.	Summary by Development Account	Total Estimated Cost		Total Actual Cost	
		Original	Revised	Obligated	Expended
1	Total non – CFP Funds				
2	1406 Operations				
3	1408 Management Improvements Soft Costs				
	Management Improvements Hard Costs				
4	1410 Administration				
5	1411 Audit				
6	1415 Liquidated Damages				
7	1430 Fees and Costs				
8	1440 Site Acquisition				
9	1450 Site Improvements				
10	1460 Dwelling Structures				
11	1465.1 Dwelling Equipment-Nonexpendable				
12	1470 Non dwelling Structures				
13	1475 Non dwelling Equipment				
14	1485 Demolition				
15	1490 Replacement Reserve	52,206.00			
16	1492 Moving to Work Demonstration				
17	1495.1 Relocation Costs				
18	1499 Development Activities				
19	1502 Contingencies				
XX	Amount of Annual Grant: (sum of lines...)	52,206.00			
	Amount of line XX Related to LBP Activities				
	Amount of line XX Related to Section 504 compliance				
	Amount of line XX Related to Security-Soft Costs				
	Amount of line XX Related to Security-Hard Costs				
	Amount of line XX Related to Energy Conservation Measures				
	Collateralization Expenses or Debt Service				
Signature of Executive Director: (MM / DD / YY):		Signature of Public Housing Director / Office of Native American Programs Administrator: (MM / DD / YY)			

PHA Name: Housing Authority of The City of Fort Pierce		Grant Type and Name: Capital Fund Program Grant No: FL14PO4150101 Replacement Housing Factor Grant No:				Federal FY Grant: 2001		
Development Number Name/HA-Wide Activities	General Description of Major Work Activities	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Of Work
				Original	Revised	Obligated	Revised	
H-A Wide	Operations	1406	ALL	166,373.				
	Management Improvements	1408						
	1. General Management Improvements			48,000.				
	2. Skills training for Staff & Commissioners			23,000.				
	3. Technical assist for Resident Council			30,000.				
	4. Resident Education & Training			20,000.				
	5. Resident Economic Development & Resident Owned business.			30,000.				
	6. HTVN Programming			6,000.				
	7. Rental of space for Resident Council & Purchase of Equipment			8,000.				
	8. Economic Development, <u>Revolving Loan Fund</u>			13,704.				
	Sub Total			178,704.				
	Administration	1410		166,373.				
	Fees & Costs	1430		75,000.				
	Site Improvements	1450		64,700.				

Annual Statement / Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF)
Part II: Supporting Pages

PHA Name: Housing Authority of The City of Fort Pierce		Grant Type and Name: Capital Fund Program Grant No: FL14PO4150101 Replacement Housing Factor Grant No:					Federal FY Grant: 2001	
Development Number Name/HA-Wide Activities	General Description of Major Work Activities	Dev. Acct. No.	Quantity	Total Estimated Cost		Total Actual Cost		Status Of Work
				Original	Revised	Obligated	Revised	
FL41-5 ELDORADO TERRACE	MODERNIZATION OF DEVELOPMENT R00FING: FASCIA / SOFFIT	1460	70					
				350,500.				
FL41-11 C AVENUE "H"	MODERNIZATION OF DEVELOPMENT BLDG. ENVELOPE BLDG. INTERIOR	1460	12					
				38,000. 250,156.				
FL41-8 PARK TERRACE	MODERNIZATION OF DEVELOPMENT WINDOW <u>REPLACEMENT</u>	1460	105					
	SUB TOTAL			848,130.				
	DWELL EQUIP- NONEXPEND	1465 .1		25,000.				
	NON DWELL STRUCTURES	1470		15,000.				
	NON DWELL EQUIPMENT	1475		14,452.				
	RELOCATION COSTS	1495 .1		45,000.				
	<u>CONTINGENCIES</u>	1502		65,000.				
	TOTAL			1,663,732.				

Annual Statement / Performance and Evaluation Report
Capital Fund Program and Capital Fund Program Replacement Housing Factor (CFP / CFPRHF)
Part III: Implementing Schedule

PHA Name: Housing Authority of The City of Fort Pierce			Grant Type and Name: Capital Fund Program Grant No: FL14PO4150101 Replacement Housing Factor Grant No:			Federal FY Grant: 2001	
Development Number Name/HA-Wide Activities	All Funds Obligated (Quarter Ending Date)			All Funds Expended (Quarter Ending Date)			Reasons for Revised Target Dates
	Original	Revised	Actual	Original	Revised	Actual	
FL41-5	6 / 30 / 03			12 / 30 / 04			
ELDORADO							
TERRACE							
FL41-11C	6 / 30 / 03			12 / 30 / 04			
AVENUE "H"							
FL41-8	6 / 30 / 03			12 / 30 / 04			
PARK							
TERRACE							
Signature of Executive Director:			Signature of Public Housing Director / Office of Native American Programs Administrator:				
			(MM / DD / YY)				
			(MM / DD / YY)				

Capital Fund Program Five – Year Action Plan

Part I: Summary

PHA Name: Housing Authority of The City of Fort Pierce		<input checked="" type="checkbox"/> Original 5 – Year Plan <input type="checkbox"/> Revision No:			
Development Number Name/HA-Wide	Year 1	Work Statement for Year 2 FFY Grant: 2002 PHA FY: 2003	Work Statement for Year 3 FFY Grant: 2003 PHA FY: 2004	Work Statement for Year 4 FFY Grant: 2004 PHA FY: 2005	Work Statement for Year 5 FFY Grant: 2005 PHA FY: 2006
	Annual Statement				
FL41-2 Garden Terr.		848,130.			
FL41-10 S.17 th St. Circle			415,156.		
FL41-3 Lawnwood Ter			250,654.		
FL41-6 Lawnwood Terrace Annex			90,000.		
FL41-1 Wildwood Terr			92,320.		
FL41-4 Garden Terrace Annex				848,130.	
FL41-1 Wildwood Terr					848,130.
Total CFP Funds (Est.)		848,130.	848,130.	848,130.	848,130.
Total Replacement Housing Funds		52,206.			
Total Replacement Housing Funds			52,206.		
Total Replacement Housing Funds				52,206.	
Total Replacement Housing Funds					52,206.
Signature of Executive Director: (MM / DD / YY)			Signature of Public Housing Director / Office of Native American Programs Administrator: (MM / DD / YY)		

Capital Fund Program Five – Year Action Plan

Part I: Supporting Pages – Work Activities

Activities for Year 1	Activities for Year: <u>2</u> . FFY Grant: <u>2002</u> . PHA FY : <u>2003</u> .	Activities for Year: <u>3</u> . FFY Grant: <u>2003</u> . PHA FY : <u>2004</u> .
	FL41-2 GARDEN TERRACE (40 UNITS)	FL41-10 So. 27 th St. Circle (52 Units)
	Modernization of Development \$ 848,130.	Bldg. Interior \$ 415,156.
	Bldg. Envelope	FL41-3 Lawnwood Terrace (70 Units)
	Bldg. Interior	Bldg. Interior \$ 250,654.
	Electrical	FL41-6 Lawnwood Terrace Annex (14 Units)
	Mechanical	Bldg. Interior \$ 90,000.
		FL41-1 Wildwood Terrace (10 Units)
		Bldg. Interior \$ 92,320.
Activities for Year 1	Activities for Year: <u>4</u> . FFY Grant: <u>2004</u> . PHA FY : <u>2005</u> .	Activities for Year: <u>5</u> . FFY Grant: <u>2005</u> . PHA FY : <u>2006</u> .
	FL41-4 GARDEM TERRACE ANNEX (60 Units)	FL41-1 Wildwood Terrace (60 Units)
	Modernization of Development \$ 848,130.	Modernization of Development \$ 848,130.
	Bldg. Envelope	Bldg. Envelope
	Bldg. Interior	Bldg. Interior
	Electrical	Electrical
	Mechanical	Mechanical
Signature of Executive Director:	(MM / DD / YY)	Signature of Public Housing Director / Office of Native American Programs Administrator: (MM / DD / YY)

FORT PIERCE HOUSING AUTHORITY

COMMUNITY SERVICE AND FAMILY SELF SUFFICIENCY REQUIREMENTS

IN HOUSE PROCEDURE

A. NEW MOVE - IN

1. Occupancy Specialist will advise new residents 18 and older of the requirements.
2. Policy will be reviewed and person will be advised of action that will be taken if they are not in compliance (opportunity for a cure, termination, etc.).
3. Lease addendum will be signed until it becomes part of the new lease.
4. Listing of participating agencies and programs will be supplied.
5. A Community Service Packet will be provided, which contains the "Volunteer Hours Verification" sheet, and a list of participating agencies and programs to fulfill the requirement to each household member 18 years or older.
6. Persons will be advised if they have questions or concerns to call the Program Director Bobbi Jo Lewis - (561) 429-6424.

B. RE-EXAMINATIONS

1. Public Housing Processors (Resident Managers) will review requirements at yearly reexamination.
2. Policy will be reviewed and lease addendum signed, if needed.
3. Persons will be advised of action that will be taken if they are not in compliance.
4. CCS report will be generated to check for persons living in that household that will be required to comply.
5. Residents will be provided a listing of participating agencies and programs to fulfill the requirements.
6. A "Volunteer Hours Verification" form will be provided to the resident.
7. Residents will be advised to turn form to the Housing Authority on a quarterly basis when they will be given a new form.
8. Residents who did not comply will be given an opportunity for a cure by signing the "Agreement to Comply with Community Service Requirements" and performing the 'made up' hours in the next 12 months. They will also have to keep current on the present year's requirements.

C. INTERIM'S

1. Residents reporting no income, loss of employment, or information that changes status, steps 1-7 of the Re-examination section will be followed.
2. When resident status has changed because of age, disability,

D. IN-HOUSE PROCESS

1. A CCS mated report will be printed by the Housing Processors each month to indicate who will have to be notified of the requirement at the re-exam appointment for that month
2. Additions or deletions (from interims) will be recorded on their lists.
3. The Housing Processors (Resident Managers) will forward the monthly CCS report to the Program Director -Bobbi Jo Lewis.
4. Volunteer Hours Verification form will be reviewed by the Program Director -Bobbi Jo Lewis.
 - a. Review form for proper completion.
 - b. If hours are in question with program, form will be reviewed by Program Director Bobbi Jo Lewis.
 - c. Acceptable hours will be logged into CCS report
 - d. Forms will be filed into folders according to community.
 - e. If hours are not acceptable or approved, it will be the responsibility of the Program Director Bobbi Jo Lewis to notify the resident.
5. Residents not in compliance at the next annual re-exam will be sent a letter by the Public Housing Administrator informing them of noncompliance for the previous year, and action to terminate lease if they do not comply.
6. If an Agreement is signed for noncompliance, the hours being made up are in addition to the current year's requirements. The current year's requirements must be kept current.

D. VERIFICATION OF EXEMPTION

Verification *of* exemption will include the following:

- SSI (Supplemental Security Income)
- SSDI (Social Security Disability Income)
- SS (Social Security, 62 and older)
- ?? FSS (Family Self-Sufficiency) Program
- ?? Documentation *of* vocational program from administering agency
- Verification *of* legal blindness
- Verification by family member that resident is the primary care giver

SUBPART F

**24 CFR IX (4-1-00 Edition)
WHEN RESIDENT MUST PERFORM
COMMUNITY SERVICE ACTIVITIES OR
SELF-SUFFICIENCY WORK ACTIVITIES**

960.600 IMPLEMENTATION

PHA's and residents must comply with the requirements of this subpart beginning with PHA fiscal years that commence on or after October 1, 2000. Unless otherwise provided by 903.11 of this chapter. Annual plans submitted for those fiscal years are required to contain information regarding the PHA's compliance with the community service requirement, as described in 903.7 of this chapter.

960.601 DEFINITIONS

- (1) General Definitions: Terms defined in Part 5 subpart A of this title: Public Housing Agency (PHA).
- (2) Definitions concerning income and rent. The following terms are defined in part 5, subpart F of this title: *economic self-sufficiency program*, *work activities*.

(b) *Other definitions*. In addition to the definitions in paragraph (a) of this section, the following definitions apply.

Community Service - The performance of voluntary work or duties that are a public benefit, and that serve to improve the quality of life, enhance resident self-sufficiency, or increase resident self-responsibility in the community. Community service is NOT employment and may not include political activities.

- (5) Is engaged in work activities;
- (6) Meets the exempt requirements for work activity of Social Security Act.;
- (7) Is a member of a family receiving assistance, benefits, or services under Social Security Act.;

Service Requirement. The obligation of each adult resident, other than exempt individual, to perform community service or participate in an economic self-sufficiency program required in accordance with * 960.603

960.603 GENERAL REQUIREMENTS

- (a) Service Requirements.** Except for any family member who is an exempt individual, each adult resident of Public Housing must:
- (1) Contribute 8 hours per month of community service (not including political activities); or
 - (2) Participate in an economic self-sufficiency program for 8 hours per month; or
 - (3) Perform 8 hours per month of combined activities as described (above) in paragraphs (a)(1) and (a)(2) of this section.
- (b) Family Violation of Service Requirement.** The lease shall specify that it shall be renewed automatically for all purposes, unless the family fails to comply with the service requirement. Violation of services requirement is grounds for non-renewal of the lease at the end of the twelve month lease term, but not for termination of tenancy during the course of the twelve month lease term (see * 966.4(1)(2)(i) of this chapter).

960.605 How PHA administers service Requirements

- (a) PHA Policy** - Each PHA must develop a local policy for administration of the community service program and economic self-sufficiency requirements for public housing residents.
- (b) Administration of qualifying community service or self-sufficiency activities for residents.** The PHA may administer qualifying community service program and economic self-sufficiency activities directly or make such activities available through a contractor, or through partnerships with qualified organizations, and community agencies or institutions.
- (c) PHA responsibilities.**

 - (1) The PHA policy must describe how the PHA determines which family members are subject to or are exempt from the service requirement, and the process for determining any changes to exempt or non-exempt status of family members.
 - (2) The PHA must give the family a written description of the service requirement, and of the process for claiming status as an exempt person, and for PHA verification of such status. The PHA must also notify the family of its determination identifying the family members who are subject to the service requirement, and tile family members who are exempt persons.
 - (3) The PHA must review family compliance with service requirements, and must verify such compliance annually at least thirty (30) days before the end of the twelve (12) month lease term. If qualifying activities are administered by an organization other than the PHA, the PHA shall obtain verification of family compliance from such third parties.
 - (4) The PHA must retain reasonable documentation of service requirement performance or exemption in participant files.
 - (5) The PHA must comply with non-discrimination and equal opportunity requirements listed at 5.105(a) of this title.

- (c) *Tenant Agreement to comply with service requirement.* If the tenant or any other family member has violated the service requirement, the PHA may not renew the

- lease upon expiration of the term *unless:*
- (a) Third party Certification. If qualifying activities are administered by an organization other than the PHA, a family member who is required to fulfill a service requirement must provide signed certification to the PHA by such other organization that the family member has performed such qualifying activities.
- (b) PHA notice of Noncompliance.
- (1) If PHA determines that there is a family member who is required to fulfill a service requirement, but who has violated this family obligation requirement are currently complying with the service requirement or (non-compliant resident), the PHA must notify the tenant of this determination.

960.609 Prohibition against replacement of PHA employees:

- (I) Briefly describe the noncompliance:
- In implementing the service requirement under this subpart, the PHA may not substitute community (self-sufficient) activities performed by residents for work ordinarily performed by PHA employees or replace a job at any location where residents perform activities to satisfy the service requirement.
- (II) The tenant, and any other non-compliant resident, enter into a written agreement with the PHA, in the form and manner required by the PHA to cure such noncompliance in accordance with such agreement; OR
- (b) The family provides written assurance satisfactory to the PHA, that the tenant or other non-compliant resident no longer resides in the unit.
- (III) State that the tenant may request a grievance hearing on the PHA determination, in accordance with part 966, subpart H of this chapter, and that the tenant may exercise any available judicial remedy to seek timely redress for the PHA's non-renewal of the lease because of such determination.

Chapter 14

COMPLAINTS, GRIEVANCES AND APPEALS

24 CFR Part 966 Subpart B

INTRODUCTION

The informal hearing requirements defined in HUD regulations are applicable to participating families who disagree with an action, decision, or inaction of the PHA. This Chapter describes the policies to be used when families disagree with a PHA decision. It is the policy of the PHA to ensure that all families have the benefit of all protections due to them under the law.

[INSTRUCTION: In addition to complaints from families, PHAs also receive complaints from employees and the public. It is suggested that PHAs develop specific procedures that define how such complaints will be processed]

- Grievances shall be handled in accordance with the PHA's approved Grievance Procedures. The written grievance procedure is incorporated into this document by reference and is the guideline to be used for grievances and appeals.

A. COMPLAINTS

- * The FPHA will respond promptly to all complaints.
- * Each complaint regarding physical condition of the units may be reported by phone to the Resident Manager or Maintenance Department. Anonymous complaints are checked whenever possible. The FPHA does not require that complaints be put in writing.

Complaints from families. If a family disagrees with an action or inaction of the PHA, complaints will be referred to the Director of Operations. Complaints regarding physical condition of the units may be reported by phone to the Maintenance Supervisor.

Complaints from staff. If a staff person reports a family is violating or has violated a lease provision or is not complying with program rules, the complaints will be referred to the Crime Prevention Officer.

Complaints from the general public. Complaints or referrals from persons in the community in regard to the PHA or a family will be referred to the Crime Prevention Officer.

- Anonymous complaints will be checked whenever possible.

B. APPEALS BY APPLICANTS

Applicants who are determined ineligible, who do not meet the PHA's admission standards, or where the PHA does not have an appropriate size and type of unit in its inventory will be given written notification promptly, including the reason for the determination.

Ineligible applicants will be promptly provided with a letter detailing their individual status, stating the reason for their ineligibility, and offering them an opportunity for an informal hearing.

Applicants must submit their request for an informal hearing in writing to the PHA within 5 working days from the date of the notification of their ineligibility.

If the applicant requests an informal hearing, the PHA will provide an informal hearing within 15 working days of receiving the request. The PHA will notify the applicant of the place, date, and time.

Informal hearings will be conducted by an impartial hearing officer. The person who is designated as the hearing officer cannot be the person who made the determination of ineligibility or a subordinate of that person.

The applicant may bring to the hearing any documentation or evidence S/he wishes and the evidence along with the data compiled by the PHA will be considered by the hearing officer.

The hearing officer will make a determination based upon the merits of the evidence presented by both sides. Within 5 working days of the date of the hearing, the hearing officer will mail a written decision to the applicant and place a copy of the decision in the applicants file.

The grievance procedures for Public Housing tenants do not apply to PHA determinations that affect applicants.

C. APPEALS BY TENANTS

Grievances or appeals concerning the obligations of the tenant or the PHA under the provisions of the lease shall be processed and resolved in accordance with the Grievance Procedure of the PHA, which is in effect at the time such grievance or appeal arises.

(See the PHA's **Grievance Procedure contained in this chapter.**)

D. HEARING AND APPEAL PROVISIONS FOR "RESTRICTIONS ON ASSISTANCE TO NON-CITIZENS"

Assistance to the family may not be delayed, denied or terminated on the basis of immigration status at any time prior to the receipt of the decision on the INS appeal.

Assistance to a family may not be terminated or denied while the PHA hearing is pending but assistance to an applicant may be delayed pending the PHA hearing.

INS Determination of Ineligibility

If a family member claims to be an eligible immigrant and the INS SAVE system and manual search do not verify the claim, the PHA notifies the applicant or tenant within ten days of their right to appeal to the INS within thirty days or to request an informal hearing with the PHA either in lieu of or subsequent to the INS appeal.

If the family appeals to the INS, they must give the PHA a copy of the appeal and proof of mailing or the PHA may proceed to deny or terminate. The time period to request an appeal may be extended by the PHA for good cause.

The request for a PHA hearing must be made within fourteen days of receipt of the notice offering the hearing or, if an appeal was made to the INS, within fourteen days of receipt of that notice.

After receipt of a request for an informal hearing, the hearing is conducted as described in the "Grievance Procedures" section of this chapter for both applicants and participants. If the hearing officer decides that the individual is not eligible, and there are no other eligible family members the PHA will:

Deny the applicant family.

Terminate the participant

If there are eligible members in the family, the PHA will offer to prorate assistance or give the family the option to remove the ineligible members.

All other complaints related to eligible citizen/immigrant status:

If any family member fails to provide documentation or certification as required by the regulation, that member is treated as ineligible. If all family members fail to provide, the family will be denied or terminated for failure to provide.

Participants whose assistance is pro-rated (either based on their statement that some members are ineligible or due to failure to verify eligible immigration status for some members after exercising their appeal and hearing rights described above) are entitled to a hearing based on the right to a hearing regarding determinations of Tenant Rent and Total Tenant Payment.

Families denied or terminated for fraud in connection with the non-citizens rule are entitled to a review or hearing in the same way as terminations for any other type of fraud.

* E. GRIEVANCE PROCEDURES

Definitions

Grievance. Any dispute which a tenant may have with respect to a Housing Authority action or failure to act in accordance with the individual tenant's lease or PHA regulations that adversely affect the individual tenant's rights, duties, welfare, or status.

Complainant. Any tenant whose grievance is presented to the PHA or at the site/management office informally or as part of the informal hearing process.

Hearing Officer/Hearing Panel. A person or persons selected in accordance with this grievance procedure to hear grievances and render a decision with respect thereto.

Tenant. A lessee or the remaining head of household of any tenant family residing in housing accommodations owned or leased by the PHA.

Elements of Due Process. An eviction action or a termination of tenancy in a State or local court in which the following procedural safeguards are required.

- Adequate notice to the tenant of the grounds for terminating the tenancy and for eviction;

- Opportunity for the tenant to examine all relevant documents, records, and regulations of the PHA prior to the trial for the purpose of preparing a defense;

- Right of the tenant to be represented by counsel;

- Opportunity for the tenant to refute the evidence presented by the PHA including the right to confront and cross-examine witnesses and to present any affirmative legal or equitable defense which the tenant may have;

- A decision on the merits of the case.

Applicability

[INSTRUCTION This provision is applicable in "due process" States only.]

This Grievance Procedure applies to all individual grievances, except any grievance concerning a termination of tenancy or eviction that involves:

Any activity, not just criminal activity, that threatens the health, safety, or right to peaceful enjoyment of the premises of other residents or PHA employees, or

Any drug-related criminal activity *on* or *off* such premises.

Pre-Hearing Procedures

Informal Conference Procedures

Any grievance shall be presented in writing to the PHA office or to the housing management office that sent the notice on which the grievance is based. Written grievances must be signed by the complainant. The grievance must be presented within a reasonable time, not past the first working day after the 5th day of the action or failure to act that is the basis for the grievance. It may be simply stated, but shall specify:

The particular grounds upon which it is based,

The action requested; and

The name, address, and telephone number of the complainant, and similar information about the complainants representative, if any.

The purpose of the initial discussion is to discuss and to resolve the grievance without the necessity of a formal hearing.

Within five working days, a summary of this discussion will be given to the complainant by a PHA representative. One copy will be filed in the tenants file.

The summary will include: names of participants, the date of the meeting, the nature of the proposed disposition, and the specific reasons for the disposition. The summary will also specify the steps by which a formal hearing can be obtained.

Dissatisfaction with Informal Conference

If the complainant is dissatisfied with the proposed disposition of the grievance, s/he shall submit a written request for a hearing within 5 working days of the date of the summary of the informal meeting.

The request for a hearing must be presented to the PHA's central office legal department.

The request must specify the reason for the grievance request and the relief sought.

Failure to Rearrest a Formal Hearing

If the complainant does not request a formal hearing within 5 working days, s/he waives his/her right to a hearing, and the PHA's proposed disposition of the grievance will become final. This section in no way constitutes a waiver of the complainant's right to contest the PHA's disposition in an appropriate judicial proceeding.

Right to a Hearing

After exhausting the informal conference procedures outlined above, a complainant shall be entitled to a hearing before a hearing officer.

- * The head of household or other adult household member must attend the hearing.
- * If rescheduling of the hearing is necessary, the hearing must be rescheduled at least 24 hours in advance of the scheduled hearing time or the complainant waives their right to a hearing].
- * If the complainant fails to appear within 15 minutes of the scheduled time, the complainant waives their right to a hearing.

The PHA will provide reasonable accommodation for persons with disabilities to participate in the hearing. The PHA must be notified within 48 hours of the scheduled time if special accommodations are required

Selection of Hearing Officer

A grievance hearing shall be conducted by an impartial person or persons appointed by the PHA other than the person who made or approved the PHA action under review, or a subordinate of such person.

Procedures to Obtain a Hearing

Informal Prerequisite

All grievances must be informally presented as a prerequisite to a formal hearing.

The hearing officer may waive the prerequisite informal conference if, and only if, the complainant can show good cause why s/he failed to proceed informally.

Escrow Deposit

Before a hearing is scheduled in any grievance involving an amount of rent the PHA claims is due, except grievances concerning imputed welfare benefits or use of minimum rent, the complainant shall pay to the PHA all rent due and payable as of the month preceding the month in which the act or failure to act took place. Grievances concerning imputed welfare benefits and minimum rents are exempt from the escrow deposit requirement.

The complainant shall thereafter deposit the same amount of the monthly rent in an escrow account each month until the complaint is resolved by decision of the hearing official or panel.

The PHA may waive these escrow requirements in extraordinary circumstances.

Unless so waived, failure to make the required escrow payments shall result in termination of the grievance procedure.

Failure to make such payments does not constitute a waiver of any right the complainant may have to contest the PHA's disposition of the grievance in any appropriate judicial proceeding.

Scheduling

If the complainant complies with the procedures outlined above, a hearing shall be scheduled by the hearing panel promptly within 15 working days at a time and place reasonably convenient to the complainant and the PHA.

A written notification of the date, time, place, and procedures governing the hearing shall be delivered to the complainant and the appropriate PHA official.

Hearing Procedures

The hearing shall be held before a hearing officer.

The complainant shall be afforded a fair hearing and be provided the basic safeguards of due process to include:

The opportunity to examine and to copy before the hearing, all documents, records and regulations of the PHA that are relevant to the hearing with at least a 72 hour notice to the legal department prior to the hearing. Any document not so made available after request by the complainant may not be relied upon by the PHA at the hearing.

The PHA shall also have the opportunity to examine and to copy at the expense of **the PHA** all documents, records and statements that the family plans to submit during the hearing to refute the PHA's inaction or proposed action. Any documents not so made available to the PHA may not be relied upon at the hearing.

The right to a private hearing unless otherwise requested by the complainant.

The right to be represented by counsel or other person chosen as a representative.

The right to present evidence and arguments in support of the complaint, to controvert evidence presented by the PHA, and to confront and cross-examine all witnesses upon whose testimony or information the PHA relies, limited to the issues for which the complainant has received the opportunity for a formal hearing; and

The right to a decision based solely and exclusively upon the facts presented at the hearing.

If the **hearing panel determines** that the issue has been previously decided in another proceeding, a decision may be rendered without proceeding with the hearing.

If the complainant or PHA fail to appear at the scheduled hearing, the hearing panel may:

- * make a determination that the party has waived his/her right to a hearing.

Such a determination in no way waives the complainant's right to appropriate judicial proceedings in another forum.

At the hearing, the complainant must first make a showing of an entitlement to the relief sought and thereafter the PHA must sustain the burden of justifying the PHA action or failure to act against which the complaint is directed.

The hearing shall be conducted by the hearing panel as follows:

Informal: Oral and documentary evidence pertinent to the facts and issues raised by the complaint may be received without regard to admissibility under the rules of evidence applicable to judicial proceedings;

Formal: The hearing panel shall require the PHA, complainant, counsel, and other participants and spectators to conduct themselves in an orderly manner. The failure to comply with the directions of the hearing official/panel to maintain order will result in the exclusion from the proceedings, or a decision adverse to the interests of the disorderly party and granting or denial of the relief sought, as appropriate.

The PHA arranges, in advance, in writing, for a transcript or audiotape of the hearing. Any interested party may purchase a copy of such transcript.

Decisions of the Hearing Officer/Panel

The hearing panel shall give the PHA and the complainant a written decision, including the reasons for the decision, within 5 working days following the hearing. The PHA will place one copy in the tenant files. The written decision will be sent to the address provided at the hearing.

The decision of the hearing panel shall be binding on the PHA which shall take all actions necessary to carry out the decision, unless the complainant requests Board action within 10 working days prior to the next Board meeting. The PHA Commissioners' decision will be mailed to the complainant with 15 calendar days following the Board meeting, and so notifies the complainant that:

The grievance does not concern the PHA action or failure to act in accordance with or involving the complainant's lease or PHA regulations which adversely affect the complainant's rights, duties, welfare or status;

The decision of the hearing panel is contrary to applicable Federal, State, or local law, HUD regulations or requirements of the Annual Contributions Contract between HUD and the PHA.

A decision by the hearing panel or PHA Commissioners in favor of the PHA or which denies the relief requested by the complainant in whole or part shall not constitute a waiver of, nor affect in any manner whatever, the rights of the complainant to a trial or judicial review in any proceedings which may thereafter be brought in the matter.

Housing Authority Eviction Actions

If a tenant has requested a hearing in accordance with these duly adopted Grievance Procedures on a complaint involving a PHA notice of termination of tenancy, and the **hearing panel** upholds the PHA action, the PHA shall not commence an eviction action until it has served a notice to vacate on the tenant.

In no event shall the notice to vacate be issued prior to the decision of the hearing panel having been mailed or delivered to the complainant.

Such notice to vacate must be in writing and specify that if the tenant fails to quit the premises within the applicable statutory period, or on the termination date as stated in the notice of termination, whichever is later, appropriate action will be brought against the complainant. The complainant may be required to pay court costs and attorney fees.

PET POLICY





Quality Housing and Work Responsibility Act of 1999 allow residents to own one or more common household pets, subject to reasonable rules issued by the Fort Pierce Housing Authority (FPHA).

This explains the Ft. Pierce Housing Authority's policies on the keeping of pets and any criteria or standards pertaining to the policy. The rules adopted are reasonably related to the legitimate interest of this FPHA to provide a decent, safe and sanitary living environment for all tenants, to protecting and preserving the physical condition of the property, and the financial interest of the FPHA.









The purpose of this policy is to establish the FPHA's policy and procedures for ownership of pets in the units and to ensure that no applicant or resident is discriminated against regarding admission or continued occupancy because of ownership of pets. This policy does not apply to animals that are used to assist persons with disabilities. Assistive animals are allowed with no restrictions other than those imposed to maintain their units and associated facilities in a decent, safe, and sanitary manner to refrain from disturbing their neighbors. It also establishes reasonable rules governing the keeping of common household pets.

ANIMALS ASSIST PERSONS WITH DISABILITIES

Some pet rules may not apply to animals who assist persons with disabilities. To be excluded from the pet policy, the resident/pet owner must certify:

-   That there is a person with a disability in the household;
-   That the animal has been trained to assist with the specified disability

The FPHA will refuse to register a pet if:

-   The pet is not a common household pet as defined in this policy;
-   Keeping the pet would violate any House Pet Rules;
-   The pet owner fails to provide complete pet registration information, or fails to update the registration annually;
-   The FPHA reasonable determines that the pet owner is unable to kept the pet in compliance with the pet rules and other lease obligations. The pet's temperament and behavior may be considered as a factor in determining the pet owner's ability to comply with provisions of the lease.

The notice of refusal may be combined with a notice of a pet violation.

A resident who cares for another resident's pet must notify the FPHA and agree to abide by all of the pet rules in writing.

A. MANAGEMENT APPROVAL OF PETS:

All pets must be approved in advance by the FPHA management.
The pet owner must submit and enter into a Pet Agreement with the FPHA.

Registration of Pets

Pets must be registered with the FPHA before they are brought onto the premises. Registration includes certificate signed by a licensed veterinarian or State/Local authority that the pet has received all shots required by State or local law, and that the pet has an communicable disease(s) and is pest-free.

- ~~✍✍~~ Registration must be renewed and will be coordinated with the annual recertification date and proof of license and inoculation will be submitted at time of recertification to the manager.
- ~~✍✍~~ Dogs and cats must be spayed or neutered.
- ~~✍✍~~ Approval for the keeping of a pet shall not be extended pending the completion of these requirements.
- ~~✍✍~~ Dogs and cats must have collars with the name and address of the owner.
- ~~✍✍~~ A picture of the pet and owner must be provided at the time of registration.

Refusal to Register Pets

The FPHA may not refuse to register a pet based on the determination that the pet owner is financially unable to care for the pet. If the FPHA refuses to register a pet, a written notification will be sent to the pet owner stating the reason for denial and shall be served in accordance with Housing and Urban Development (HUD) Notice requirements.

B. STANDARDS FOR PETS:

- ~~✍✍~~ If an approved pet gives birth to a litter, the resident must remove all pets from the premises except two.
- ~~✍✍~~ Pets must be on a leash whenever walking the pet outside the unit.
- ~~✍✍~~ No chains can be used to tie pets up to the outside or inside the unit.
- ~~✍✍~~ Pets must be kept inside the unit when owner is away from the unit.
- ~~✍✍~~ Pet rules will not be applied to animals who are medically needed for Medical Doctor.

Persons with Disabilities:

To be excluded from the pet policy, the resident/pet owner must certify:

- ~~✍✍~~ That there is a person with a disability in the household;
- ~~✍✍~~ That the animal has been trained to assist with the specified disability; and
- ~~✍✍~~ That the animal actually assists the person with the disability.

Types of Pets Allowed

No types of pets other than the following may be kept by a resident.

~~✍✍~~ Tenants are not permitted to have more than one type of pet.

1. Dogs

~~✍✍~~ Maximum number – 2

~~✍✍~~ Maximum adult weight – 35 pounds

~~✍✍~~ Must be housebroken

~~✍✍~~ Must be spayed or neutered

~~✍✍~~ Must have all required inoculations

~~✍✍~~ Must be licensed as specified now or in the future by State law and local ordinance

2. Cats

~~✍✍~~ Maximum number – 2

~~✍✍~~ Must be declawed

~~✍✍~~ Must be spayed or neutered

~~✍✍~~ Must have all required inoculations

~~✍✍~~ Must be training to use a litter box or other waste receptacle

~~✍✍~~ Must be licensed as specified now or in the future by State law or local ordinance

3. Birds

~~✍✍~~ Maximum number 2

~~✍✍~~ Must be enclosed in a cage at all times

4. Fish

~~✍✍~~ Maximum aquarium size – 20 gallons

~~✍✍~~ Must be maintained on an approved industry stand.

5. Rodents (Rabbit, guinea pig, hamster, or gerbil **ONLY)**

~~✍✍~~ Maximum number 2

~~✍✍~~ Must be enclosed in an acceptable industry cage at all times

~~✍✍~~ Must have any or all inoculations as specified now or in the future by State law or local ordinance.

6. Turtles

~~✍✍~~ Maximum number 2

~~✍✍~~ Must be enclosed in an acceptable industry cage or container at all times..

C. PETS TEMPORARILY ON THE PREMISES

~~✍✍~~ Pets which are not owned by a tenant will not be allowed.

~~✍✍~~ Residents are prohibited from feeding or harboring stray animals.

- ✍✍ This rule excludes visiting pet programs sponsored by a humane society or other non-profit organization and approved by the FPHA.
- ✍✍ State or local laws governing pets temporarily in dwelling accommodations shall prevail.

D. DESIGNATION OF PET/NO-PET AREAS

- ✍✍ The following areas are designated no-pet areas:
- ✍✍ Police Sub-Station (2304 Ave I)
- ✍✍ Boys & Girls Club Building (3100 Ave G)
- ✍✍ Parkland Community Building (1211 Ave Q)
- ✍✍ Resource Center (1011 23rd Street)
- ✍✍ Wee Wuns Day Care (303 South 32nd Street, 505 A & B, South 32nd Street)
- ✍✍ All Administrative Offices of the FPHA (i.e. Section 8, Maintenance and Occupancy Site Offices)

E. ADDITIONAL FEES AND DEPOSITS FOR PETS

- ✍✍ The resident/pet owner shall be required to pay a refundable deposit for the purpose of defraying all reasonable costs directly attributable to the presence of a dog or cat.
- ✍✍ An initial payment of \$300.00 for the first pet and \$150.00 for any additional pets.

AND/OR

Monthly payments in an amount no less than \$50.00 until the specified deposit has been paid.

- ✍✍ The PHA reserves the right to change or increase the required deposit by amendment to these rules.
- ✍✍ The FPHA will refund the pet deposit to the tenant, less any damage caused by the pet to the dwelling unit, upon removal of the pet; or the owner from the unit.
- ✍✍ The FPHA will return the pet deposit to the former tenant or to the person designated by the former tenant in the event of the former tenant's incapacitation or death.
- ✍✍ The FPHA will provide the tenant or designee identified above with a written list of any charges against the pet deposit. If the tenant disagrees with the amount charged to the pet deposit, the FPHA will provide a meeting to discuss the charges.
- ✍✍ All reasonable expenses incurred by the FPHA as a result of damages directly attributable to the presence of the pet in the project will be the responsibility of the resident, including;
 - The cost of repairs and replacements to the resident's dwelling unit;
 - Fumigation of the dwelling unit;

- Common areas of the project.
- ~~✍✍~~ Pet deposits are not a part of rent payable by the resident.

F. ALTERATIONS TO UNIT

Residents/pet owners shall not alter their unit, patio, premises or common areas to create an enclosure for any animal. Installation of pet doors is prohibited.

G. PET WASTE REMOVAL CHARGE

- ~~✍✍~~ A separate pet waste removal charge of \$10.00 per occurrence will be assessed against the resident for violations of the pet policy.
- ~~✍✍~~ Pet deposit and pet waste removal charges are not part of rent payable by the resident.
- ~~✍✍~~ All reasonable expenses incurred by the FPHA as the result of damages directly attributable to the presence of the pet will be the responsibility of the resident, including:
 - The cost of repairs and replacements to the dwelling unit;
 - Fumigation of the dwelling unit.
- ~~✍✍~~ If the tenant is in occupancy when such costs occur, the tenant shall be billed for such costs as a current charge.
- ~~✍✍~~ If such expenses occur as the result of a move-out inspection, they will be deducted from the pet deposit. The resident will be billed for any amount which exceeds the pet deposit.
- ~~✍✍~~ The pet deposit will be refunded when the resident moves out or no longer has a pet on the premises, whichever occurs first.
- ~~✍✍~~ The expense of flea disinfestations shall be the responsibility of the resident.

H. PET AREA RESTRICTIONS

- ~~✍✍~~ Pets must be maintained within the resident's unit. When outside of the unit (within the building or on the grounds) dogs and cats must be kept on a leash or carried and under the control of the resident or other responsible individual at all times.
- ~~✍✍~~ Pets are not permitted in common areas including lobbies, community rooms and laundry areas except for those common areas which are entrances to and exits from the building.
- ~~✍✍~~ No area is designated for pets to release their waste, residents/pet owners must clean up after their pets and are responsible for pet waste.

I. NOISE

- ~~✍✍~~ Pet owners must agree to control the noise of pets so that such noise does not constitute a nuisance to other residents or interrupt the peaceful enjoyment of their housing unit or premises. This includes, but is not limited to loud or continuous barking, howling, whining, biting, scratching, chirping, or other such activities.

J. CLEANLINESS REQUIREMENT

- ✍✍ Litter Box Requirements – All animal waste or the litter from litter boxes shall be picked up immediately by the pet owner, disposed of in sealed plastic trash bags, and placed in a trash bin.
 - Litter shall not be disposed of by being flushed through a toilet.
 - Litter boxes shall be stored inside the resident's dwelling unit.
- ✍✍ Removal of waste from other locations – The resident/pet owner shall be responsible for the removal of waste from the exercise area by placing it in a sealed plastic bag and disposing of it in an outside trash bin/other container provided by the FPHA.
- ✍✍ Any unit occupied by a dog, cat, or rodent will be fumigated at the time the unit is vacated.
- ✍✍ The resident/pet owner shall take adequate precautions to eliminate any pet odors within or around the unit and to maintain the unit in a sanitary condition at all times.

PET CARE

- ✍✍ No pet (excluding fish) shall be left unattended in any apartment for a period in excess of 24 hours.
- ✍✍ All residents/pet owners shall be responsible for adequate care, nutrition, exercise and medical attention for his/her pet.
- ✍✍ Residents/pet owners must recognize that other residents may have chemical sensitivities or allergies related to pets, or may be easily frightened or disoriented by animals. Pet owners must agree to exercise courtesy with respect to other residents.

RESPONSIBILITIES

The resident/pet owner will be required to designate two responsible parties for the care of the pet if the health or safety of the pet is threatened by the death or incapacity of the pet owner, or by other factors that render the pet owner unable to care for the pet.

INSPECTIONS

- ✍✍ The FPHA may, after reasonable notice to the tenant during reasonable hours, enter and inspect the premises, in addition to other inspections allowed.
- ✍✍ The FPHA may enter and inspect the unit only if a written complaint is received alleging that the conduct or condition of the pet in the unit constitutes a nuisance or threat to the health or safety of the other occupants or other persons in the community under applicable State or local law.

- ✍️ Resident/Pet Owners must have pets locked when FPHA personnel enters the unit.
- ✍️ Pet signs must be posted on the front exterior door stating type of animal in the unit. Signs must also be posed on the room where pet is located inside the unit.

PET RULE VIOLATION NOTICE

If a determination is made on objective facts supported by written statements, that a resident/pet owner has violated the Pet Rule Policy, written notice will be served.

The Notice will contain a brief statement of the factual basis for the determination and the pet rule(s) which were violated. The notice will also state:

That the resident/pet owner has 10 days from the effective date of the service of notice to correct the violation or make written request for a meeting to discuss the violation;

That the resident pet owner is entitled to be accompanied by another person of his or her choice at the meeting; and

That the resident/pet owner's failure to correct the violation, request a meeting, or appear at a requested meeting may result in initiation of procedures to terminate the pet owner's tenancy.

If the pet owner requests a meeting within the 10 day period, the meeting will be scheduled no later than 5 calendar days before the effective date of service of the notice, unless the pet owner agrees to a later date in writing.

NOTICE FOR PET REMOVAL

If the resident/pet owner and the FPHA are unable to resolve the violation at the meeting or the per owner fails to correct the violation in the time period allotted by the FPHA, the FPHA may serve notice to remove the pet.

The Notice shall contain:

A brief statement of the factual basis for the FPHA's determination of the Pet Rule that has been violated;

The requirement that the resident/pet owner must remove the pet within 5 days of the notice, and

A statement that failure to remove the pet may result in the initiation of termination of tenancy procedures.

TERMINATION OF TENANCY

The FPHA may initiate procedures for termination of tenancy based on a pet rule violation if:

The pet owner has failed to remove the pet or correct a pet rule violation within the time period specified; and
The pet rule violation is sufficient to being procedures to terminate tenancy under terms of the lease.

Q. PET REMOVAL

If the death or incapacity of the pet owner threatens the health or safety of the pet, or other factors occur that render the owner unable to care for the pet, the situation will be reported to the Responsible Party designated by the resident/pet owner. This includes pets who are poorly cared for or have been left unattended for over 24 hours.

If the responsible party is unwilling or unable to care for the pet, or if the PHA after reasonable efforts cannot contact the responsible party, the FPHA may contact the appropriate State or local agency and request the removal of the pet.

If the pet is removed as a result of any aggressive act on the part of the pet, the pet will not be allowed back on the premises.

R. EMERGENCIES

The FPHA will take all necessary steps to insure that pets which become vicious, display symptoms of severe illness, or demonstrate behavior that constitutes an immediate threat to the health or safety of others, are referred to the appropriate State or local entity authorized to remove such animals.

If it is necessary for the FPHA to place the pet in a sheltered facility, the cost will be the responsibility of the tenant/pet owner.

Public Housing Drug Elimination Program Plan

Note: THIS PHDEP Plan template (HUD 50075-PHDEP Plan) is to be completed in accordance with instructions located in applicable PIH Notices.

Annual PHDEP Plan Table of Contents:

1. General Information/History
2. PHDEP Plan Goals/Budget
3. Milestones
4. Certifications

Section 1: General Information/History

A. Amount of PHDEP Grant \$ 180,620.00

B. Eligibility type (Indicate with an "x")	N1	N2	R X
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C. FFY in which funding is requested	2000
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D. Executive Summary of Annual PHDEP Plan

In the space below, provide a brief overview of the PHDEP Plan, including highlights of major initiatives or activities undertaken. It may include a description of the expected outcomes. The summary must not be more than five (5) sentences long.

The Fort Pierce Housing Authority has developed a Drug Elimination Program that combines increased law enforcement efforts with enhanced educational and recreational opportunities for young people. The Housing Authority has contracted with the City of Fort Pierce Police Department to provide two Community Officers to work in its developments. Additionally, the Boys and Girls Clubs of St. Lucie County will continue to operate two youth centers located on FPHA developments. The PHA will also support the Police Athletic League.

E. Target Areas

Complete the following table by indicating each PHDEP Target Area (development or site where activities will be conducted), the total number of units in each PHDEP Target Area, and the total number of individuals expected to participate in PHDEP sponsored activities in each Target Area.

PHDEP Target Areas (Name of development(s) or site)	Total # of Units within the PHDEP Target Area(s)	Total Population to be Served within the PHDEP Target Area(s)
PHA WIDE	829	<u>2500</u>

F. Duration of Program

Indicate the duration (number of months funds will be required) of the PHDEP Program purposed under this Plan (place an `X' to indicate the length of program by # of months. For 'Other", identify the # of months).

6 Montbs _____ 12 Months _____ 18 Months X 24 Months _____ Other _____

G. PHDEP Program History

Indicate each FY that funding has been received under the PHDEP Program (place an 'X' by each applicable Year) and provide amount of funding received If previously funded programs have not been closed out at the time of this submission, indicate the fund balance and anticipated completion date. Fm grant extensions received, place "GE" in column or "W" for waivers.

Section 2: PHDEP Plan Goals and Budget

A PHDEP Plan Summary

In the space below, summarize the PHDEP strategy to address the needs of the target population/target area(s). Your summary should briefly identify: the broad goals and objectives, the role of plan partners, and your system or process for monitoring and evaluating PHDEP-funded activities. This summary should not exceed 5-10 sentences.

B. PHDEP Budget Summary

Enter the total amount of PHDEP funding allocated to each line item.

FY 2000 PHDEP Budget Summary	
Budget Line Item	Total Funding
9110 -Reimbursement of Law Enforcement	\$80,000.00
9120-Security Personnel	
9130 -Employment of Investigators	
9140 - Voluntary Tenant Patrol	
9150-Physical is	
9160- Drug Prevention	61,620.00
9170-Drug Intervention	12,000.00
9180 – Drug Treatment	
9190- Other Program Costs	27,000.00
TOTAL PHDEP FUNDING	180,620.00

3. PHDEP PLAN GOALS AND ACTIVITIES

In the tables below, provide information on the PHDEP strategy summarized above by budget line item. Each goal and objective should be numbered sequentially for each budget line item (where applicable). Use as many rows as necessary to list proposed activities (additional rows may e inserted in the tables). PHAs are not required to provide information in shaded boxes. Information provided must be concise – not to exceed two sentences in any column. Tables for line items in which the PHA has no planned goals or activities may be deleted.

9110 – REIMBURSEMENT OF LAW ENFORCEMENT					TOTAL PHDEP FUNDING: \$80,000		
Goal(s)		Reduce Drug and Drug Related Crime					
Objectives		Additional Patrols & Security					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1. Add'l Activities			1/01	6/02	80,000	0	Reports
2.							
3.							

9120 – SECURITY PERSONNEL					TOTAL PHDEP FUNDING: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

9130 – EMPLOYMENT OF INVESTIGATORS					TOTAL PHDEP FUNDING: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

9140 – VOLUNTARY TENANT PATROL					TOTAL PHDEP FUNDING: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

9150 – PHYSICAL IMPROVEMENT					TOTAL PHDEP FUNDING: \$		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

9160 – DRUG PREVENTION					TOTAL PHDEP FUNDING: \$12,000		
Goal(s)		Improve Life Skills					
Objectives		Educational, Cultural and recreational opportunities					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1. Life Skills							
2.							
3.							

9170 – DRUG INTERVENTION					TOTAL PHDEP FUNDING: \$61,620.00		
Goal(s)		Improve Grades, Conduct and Life Skills					
Objectives		Tutorial, Educational, Cultural and Recreation Opportunities					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

9180 – DRUG TREATMENT					TOTAL PHDEP FUNDING:		
Goal(s)							
Objectives							
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Compete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

9190 – DRUG TREATMENT					TOTAL PHDEP FUNDING: \$27,000.00		
Goal(s)		Administration					
Objectives		Salaries and Benefits					
Proposed Activities	# of Persons Served	Target Population	Start Date	Expected Complete Date	PHEDEP Funding	Other Funding Amount Source	Performance Indicators
1.							
2.							
3.							

Section 3: Expenditure/Obligation Milestones

Indicate 69 Budget Line Item and the Proposed Activity (based on the information cautioned in Section 2 PHDEP Plan Budget and Goals), the % of funds that will be expended (at least 25 % of the total gram award) and obligated (at least 50% of the total gram

BUDGET LINE ITEM #	25% Expenditure of Total grant Funds By Activity #	TOTAL PHDEP Funding Expended (sum of the activities)	50% ;Obligation of Total Grant Funds By Activity #	Total PHDEP Funding Obligated (sum of the activities)
e-g Budget Line Item # 9120	Activities 1, 3	I	Activity 2	
9110	Activity #1	25000.00	Activity #1	60000.00
9120				
9130				
9140				
9150				
9160	Activity # 1	20 000.00	Activity # 1	50,000.00
9170	Activity #1	5000.00	Activity #1	10,000.00
9180				
9190	Activity #1	10,000.00	Activity #1	20,000.00
TOTAL		S		S

Section 4: Certifications

A comprehensive certification of compliance with respect to the PHDEP Plan submission is included in the "PHA Certifications of Compliance with the PHA Plan and Related Regulations."

